First Year Research Form
Johns Hopkins University
Department of Physics and Astronomy

Hopkins ID ____________________  Student Name ____________________

Each graduate student is required to complete a research project during the three semesters of their first year and until the end of their second year (or until student finds an official advisor, whichever is first).

This form is to be used to keep track of your research requirements.

If the proposed research advisor does not hold a primary appointment as a tenure-track or research faculty member in the Department of Physics and Astronomy, the form must be co-signed by a PHA faculty member, who will serve as the departmental advisor of record. The relevant department faculty members are listed at https://physics-astronomy.jhu.edu/people/#filter=.faculty

The form should be completed, signed, dated and returned to the Academic Affairs team, BLOOMBERG 365 on or before the deadline date for the semester.

I plan to do a research project with:

Name of Research Advisor ___________________________________________

Name of Co-Advisor ________________________________________________

Institution/Dept. (If other than JHU Physics and Astronomy) __________

Semester of Research: Please select appropriate semester

☐ Fall Term continues through Intersession
  • Register for course – AS.171.805 (01)
☐ Spring Term
  • Register for course – AS.171.805 (01)
☐ Summer Term
  • Register for course – AS.171.803 (section = research advisor)

________________________________ ______________________________   ________
Signature of Student    Print Student's Name   Date:

________________________________ ______________________________ ________
Signature of Research Advisor  Print Advisor's Name  Date:

________________________________ ______________________________ ________
Signature of Co - Advisor  Print Co - Advisor's Name  Date: