Second 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 a
research 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, via JHU OneDrive 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.171.807 (01)
☐ Spring Term
   • Register for course – AS.171.807 (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:__________