Students in their final semester of study for the LSM major must register for the Culminating Experience. Students must complete this form and have it signed by their LSM advisor. Students completing this form will be registered for the non-credit course, LSM 450. Upon successful completion of LSM 450, students will receive an ‘S’ grade that will meet their final requirement toward their LSM.

Name: ___________________________________________________________ Date: ______________________

Bentley ID: __________________________ E-Mail Address: ________________________________________________

LSM Concentration: __________________________ (American Perspectives, Ethics & Social Responsibility, etc.)

Please register me for the __________________________ semester (e.g. Fall 2007, Spring 2008, etc.).

Student Signature: ______________________________________________________________

Please provide a brief description of your project. (Your LSM advisor may require more detail prior to approval of the registration):

________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________

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________________________________________________________________________________________________________________________________________________________

Approval:

LSM Advisor (Please print) __________________________________________________________ Date Approved __________________________

LSM Advisor Signature __________________________

For Office use ONLY:

LSM 450 created by __________________________
Registrar’s Official Initials __________________________ Date __________________________

DAS Updated __________________________
Registrar’s Official Initials __________________________ Date __________________________

Revised 10.7.15