

	STUDE	NT INFORM	ATION		
Student Name:		Student	Number:	Date:	
Major:	Class Stand	ing: 🗆 SR 🔲 J	R □ SO □ FR S	Semester & Year of Contr	act:
Academic Advisor Name:			Cı	umulative GPA:	
		PROCEDURE			
This form is to be comple Coordinator. At the conclu- certification that the Honor Honors Coordinator for sig	usion of the course, the Hors rs Component(s) was/were	onor Program (satisfactorily co	Coordinator will rompleted. The Ins	return the form to the structor then returns th	Instructor fo
	COUR	SE INFORM <i>A</i>	ATION		
Course Number:	Course Section:	Course 1	Γitle:		
Instructor Name:		Ac	ademic Rank:		
Description of Honors Compo	onent (attach additional materi	al if necessary): _			
Instructors Statement (describ	e how components exceed no	ormal course exp	ectations):		
	SIGNATU	RES OF AGR	EEMENT		
This agreement is between:					
Student Signature	S	Student Name (Printed)			Date
Instructor Signature		Instructor Name (Printed)			Date
This agreement is approved	by: Honors Coordinator S	gnature	Honors Coordina	tor Name (Printed)	Date
		J			
	SIGNATI	JRES OF API	PROVAL		
I certify that the above name	ed student has satisfactorily	completed the h	nonors contract in	this course according to	the standard
of this contract:					
Instructor Signature		Instructor Name (Printed)			Date
, and the second		•			
Honors Coordinator Signature	Honors Coordinator Name (Printed)			Date	
Processed by:		Date:			Rev. 1/16