



## Honors Program Contract

TERM/YEAR: \_\_\_\_\_

### CONTRACT PROPOSAL (please type or print)

#### 1. STUDENT INFORMATION:

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail: \_\_\_\_\_

#### 2. COURSE INFORMATION:

TITLE: \_\_\_\_\_

COURSE NUMBER: \_\_\_\_\_ SECTION: \_\_\_\_\_

COURSE INSTRUCTOR: \_\_\_\_\_

(please see further information on reverse→)

### SIGNATURES OF AGREEMENT (type name and check box to indicate approval)

This agreement is between:

This agreement is approved by:

\_\_\_\_\_  
STUDENT                      DATE

\_\_\_\_\_  
DIRECTOR OF HONORS      DATE

\_\_\_\_\_  
INSTRUCTOR              DATE

\_\_\_\_\_  
PROGRAM COORDINATOR    DATE  
(If adjunct instructor)

### SIGNATURES OF APPROVAL

I certify that the above-named student has satisfactorily completed the Honors Contract in this course.

FINAL COURSE GRADE \_\_\_\_\_  
HONORS PROJECT GRADE \_\_\_\_\_

\_\_\_\_\_  
INSTRUCTOR                      DATE

