HONORS CONTRACT WORKSHEET

(Return to mchonors@stlcc.edu using your my.stlcc.edu email account.)

Date Submitted			
Student Name: Student Number:			
STLCC e-mail:			
Course Number (ex. Eng. 101):	Section Number	r (ex. 601):	
Course Title:	Credit Hours:		_
Instructor:	Choose length of this course: Full 16 wks 1 st 8wks		
Instructor Email:			$\frac{1^{\text{st}} \text{ owks}}{2^{\text{nd}} \text{ 8wks}}$
Have you had an initial conversation with y open to this project? \Box YES \Box NO	your professor	to verify	that they are
Have you conducted Honors work in past year and/or applied & been admitted to the Honors program on the Meramec campus? \Box YES \Box NO			
HONORS OFFICE USE ONLY			
Approved			
Date Forwarded	CRN		
Department	FT	□ PT	
Honor's Qualifications:			
Hours Accumulated at STLCC: Cum			
nours Accumulated at STLCC: Cum	nulative GPA:		
Comments:			
Comments:			