Honors College Advising Form

Today's Date: ____________ First Honors Semester: __________ Anticipated Graduation Date: __________
First Name: __________________ Last Name: __________________ UMS Number: ____________
Number of Transfer/AP Credits: ___ Major: ___________________ 2nd Major/Minor: ____________

Courses

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<th>Requirement</th>
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E-1s

Semester Submitted
Number Submitted

Honors Mentor Form:
Date turned in: ______________
Approved: Yes  No

Thesis Proposal Form:
Date turned in: ______________
Approved: Yes  No
Honors Mentor: __________________________
Committee Member: _____________________
Committee Member: _____________________

Thesis Completion Form:
Date turned in: ______________
Date Thesis Presented: ______________

Notes/ Comments:

Graduation from CHP Approved
Date: ______________ Yes or No

Honors Advisor Signature: ___________________________ Date: __________
Student Signature: ___________________________ Date: __________