

Year _____ Semester Fall Spring Summer Date _____

STUDENT INFORMATION

Student ID number _____ Major code _____ Local phone no. _____

Student name _____
Last First Middle

Email _____

Enrolled in Honors College? Yes No

COURSE INFORMATION

CRN	PREFIX	COURSE NO.	SEC.	COURSE TITLE	DAYS	TIME	CRS.
_____	_____	_____	_____	_____	_____	_____	_____

Faculty member's name _____ Email address _____

Description of the plan of study:

- 1) *Description of the plan of study identifying the additional work to be completed that will provide an in-depth examination of the topic and enrich the student's academic experience.*
- 2) *Attach a course syllabus.*

Student signature _____ Date _____

Faculty signature _____ Date _____

Honors College signature _____ Date _____

Approved Rejected Revise and resubmit