Student Number: ______________________

Full Legal Name: ____________________________________________
(Last, First Middle)

This student has been invited into the _____________________________
Departmental Honors Program. *(Department Name)

Quarter and year begun/to begin Honors Departmental curriculum: ________________
(Qtr. Year)

OTHER STUDENT INFORMATION

Are you currently a member of the University College Honors Program? Yes ____ No ____

Have you already been admitted to other Departmental Honors Programs? Yes ____ No ____

Please list the departments: ____________________________________________

Mailing Address: _____________________________________________________

Phone Number: __________________________

Email: ________________________________

Quarter and year entered/entering University of Washington: ________________

Total Number of College Credits: ____________ Cumulative GPA: __________

I have read and understand the Departmental Honors requirements and reviewed them with my advisor. I recognize that if I do not complete the Departmental Honors requirements for at least one of my majors, I will not graduate with Honors.

Student Signature: ____________________________ Date: _________________

Departmental Advisor: _____________________________ Date: _______________

* A student already in College Honors will work toward a Bachelor’s Degree “with College Honors;” students entering Honors only through their department(s) will work towards a degree “with Distinction.”

Revised 6/13/07