

Honors Option Contract (Form 2)

Due on or before the Monday of finals week

Term: _____

Student's Name: _____

ID #: _____

Phone Number: _____

E-Mail: _____

Instructor's Name: _____

Phone Number: _____

Department Name and Course Number (i.e. GenEd 110): _____

Class Number (4 digits): _____

Section: _____

Credits for Course: _____

Name of Course (i.e. World of the Arts): _____

Student

1. What enrichment did you gain by completing this H-Option?

2. Would you suggest this H-Option project to another student? Why or why not?

3. Now that you have completed this H-Option, what would you have done differently?

Satisfactory Completion of Honors Option Work (please circle)

Yes

No

Instructor's Signature _____

Date _____