

UNIVERSITY OF HARTFORD

COLLEGE OF ARTS AND SCIENCES

Declaration of Honors Form

This form is to be used by students to declare their intention to complete the University Honors Program.

The form needs to be signed by your academic advisor and submitted to the A&S Honors Coordinator, Dr. Donald Jones, in Auerbach 212i.

Please print neatly.

Name: _____ **ID #:** _____

Major: _____ **Expected Graduation Date:** _____

Local Address: _____

Phone: _____ **Email:** _____

Honors Courses (list both those completed and those anticipated):

Course	Credits	When Completed	Instructor
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(18 credits plus the GPA of 3.25+ required by the A&S Honors Program)

Required Signatures:

Student _____ **Date** _____

Advisor _____ **Date** _____

Print Advisor's name _____ **Date** _____

A&S Honors Coordinator _____ **Date** _____

UHon Director _____ **Date** _____