Declaration of Honors Form

This form is to be used by students to declare their intention to pursue a University of Hartford Honors degree.

Please have the form signed by your *academic advisor*, then by the *Honors Coordinator of your College*. The form should then be sent to the *Director of the University Honors Program*, Dr. Claudia Oakes, in Dana 443.

Name:			
ID Number:			
Major:			
College: (A&S, BAR, CETA	A, ENHP, HARTT, HAS, F	HILLYER)	
Expected Graduation Da	te:		
E-mail address:			
Honors Courses: Enter the (TBD) for the remaining	· · · · · · · · · · · · · · · · · · ·	ve already completed. You	u may write To Be Determined
Example:			
HON 173: Intro to PSY	3 credi	its Fall 2021	Dr. Smith
TBD			
Course:	Credits:	When Completed:	Instructor:
Required Signatures:			
			Date:
			Date:
Honors Coordinator: _			Date:
Dr. Oakes (U. Honors)	:		Date: