



University Honors Program
Special Honors Verification Form

**You do not need to submit this form if you are taking HONR 4196 or HONR 4198*

Today's Date: _____

This form certifies that (student's name) _____ is pursuing special honors in the _____ department. This student is pursuing special honors in accordance with the department's requirements, which consists of enrollment in the following course(s)
_____.

To the best of my knowledge, the student has met all other departmental requirements and is qualified to pursue special honors in the major.

Departmental Advisor Name: _____

Departmental Advisor Signature: _____

Department: _____

Departmental Advisor Phone: _____

Departmental Advisor E-mail: _____

Student Name: _____

Graduation Semester/Year _____

GWID: _____

Student Signature: _____

Student Phone: _____

Student E-mail: _____

Please return this form to the Honors Office at **714 21st Street, NW** as soon as possible.
Thank you in advance for your cooperation!