This form is to be completed by the faculty member and returned to the Honors office (mail code 0355) no later than the deadline for submitting final course grades.

Student’s Name: _______________________________ Student Number: ________________

Course name and number: __________________________________________________________

Contract semester: __________________________________________________________________

Faculty Name/Title: _________________________________________________________________

Department: _______________________________________________________________________

Phone: _____________________________ Email: _________________________________________

Did the student satisfactorily complete the terms of the agreed upon Honors Contract?
Yes______ No______

Did the student receive a grade of “B” or better for the course?
Yes______ No______

Please use the space below or attach an additional page to share comments regarding the student’s work or the contracting process.

_____________________________________________________________________________

________________________________________
Faculty Signature                                      Date