

HONORS EXAMINATION REPORT
(This document will not be accepted if illegible.)

Full Name _____ Student ID #: (7 digits) _____

Major of honors work: _____

Degree of Honors: *(Check only one)*

_____ *Highest Honors*

_____ *High Honors*

_____ *Honors*

Title of Thesis: _____

Committee: **(Please print or type names here-NO signatures. Initial by printed name.)**

Initial: _____

Print Name: _____ Dept./Program _____

(Advisor Names)

1. _____ Dept./Program _____

2. _____ Dept./Program _____

3. _____ Dept./Program _____

Signed**: _____ Date _____

(Thesis Advisor, Department/Program Honors Coordinator, or Department/Program Chair)

**** Exam report will not be accepted as complete without above signature.**