



Evergreen Valley College

Honors Program

Honors Option Contract Completion

Course Number and Title: _____ Semester/Year: _____
 Student Name: _____ Student ID #: _____

Report/Comment on Instructor-Student Meeting _____
 (Number, Time Spent, Progression): _____

Description of Completed Project _____

Honors Contract Completed: Yes _____ No _____ Date of Final Student Meeting: _____
 _____ Grade in Class: _____
 _____ Units: _____

I certify that the above named student has completed the Project and has gained skills or concepts beyond the regular course material.

 Instructor Signature: _____ Date _____

FOR HONORS OFFICE USE ONLY			
Non-Honors Section:	_____	Grade in Class:	_____
Honors Section:	_____	Cumulative GPA:	_____
_____ Honors Coordinator Signature		_____ Date	