

**GEORGIA HIGHLANDS COLLEGE
Honors Option Contract**

Please complete this form and return to the Honors Director.

Steve Stuglin; Honors Program Director
Georgia Highlands College
honors@highlands.edu (email preferred)
Marietta site (for parcels, as needed)

** electronic submission is preferred **

TO BE COMPLETED BY THE HONORS STUDENT

Student Name

Student ID #

Email

Major

Course Number, Section and CRN

Course Title

Semester

Year

Credit Hours

TO BE COMPLETED BY THE SPONSORING FACULTY MEMBER

Professor Name

Title

Division

Work Phone

Email

Is your division chair aware that you are sponsoring an honors student?

yes no

TO BE COMPLETED BY THE HONORS STUDENT AND FACULTY MEMBER

***Attach* a description of the plan of study keeping in mind the following: Include information on the topic or problem to be examined, the nature of the reading assignments and the number and nature of reports or projects. Indicate how successful completion of the Honors Option will be determined.**

Be as specific as possible about the Focus, Format, Meetings, and Milestones. See <https://sites.highlands.edu/honors/honors-options-contract/> for more information on these terms.

Specify meeting dates for student-faculty consultation (must have at least 3 throughout the semester)

***Attach* a description of how this course provides an Honors experience for the students. What elements are added or changed? What constitutes academic rigor for this project? How is the assignment substantively and qualitatively different from what regular students in the course would complete in a normal semester?**

An assignment that is merely quantitatively *more*, (extra pages, extra sources, etc.) is generally not substantively or qualitatively different, and as such is generally not an adequate honors project.

Please **attach the regular class syllabus along with any additional information needed to clarify the description (e.g. a reading list, assignment instructions, etc.).**

SIGNATURES

Signature of Student _____

Date _____

Signature of Sponsoring Faculty Member _____

Date _____ _____

TO BE COMPLETED BY THE DIRECTOR OF THE HONORS PROGRAM

Approved Not Approved Explanation: _____

Signature of the Honors Director _____

Date _____

