



Honors Graduation Check Form

Name: _____ Student ID: _____

Phone Number: _____ AU Email: _____

College: _____ Major(s): _____

Minor(s): _____

Expected Month/Year of Graduation: _____

Honors distinction requirements

<i>University Honors Scholar</i>	<i>Honors Scholar</i>
✓ 30 Total Honors Hours ✓ 6 hours of Senior Year Experience courses ✓ 3 hours of Honors Participation courses ✓ 3.4 GPA (unadjusted)	✓ 24 Total Honors hours ✓ 3 hours of Honors Participation courses ✓ 3.2 GPA (unadjusted)

Please list the distinction which you are planning to graduate with: _____

Have you completed the requirements for this distinction already? **Yes** **No**

Please list the total number of Honors hours you have completed below:

Academic hours: _____ Participation hours: _____ Senior Year Experience hours: _____

Please list the courses you will take or contract (and the term you plan to complete them) to earn any remaining requirements for graduation with your Honors distinction:

Course: _____ Term: _____

Course: _____ Term: _____

Course: _____ Term: _____

Course: _____ Term: _____

Office Use Only:
Hours completed:
Hours remaining:
Distinction:
Term:

By signing below, I certify that the information contained above is true and accurate.

Signature: _____

Date: _____