

# School of Kinesiology

## Honors Application Form

Student Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

Email: \_\_\_\_\_

Major: \_\_\_\_\_

Date: \_\_\_\_\_

I am tentatively planning to apply the following six hours from the approved honors course list.

Year/Semester	Course #	Course Title	Instructor (if known)
_____	_____	_____	_____
_____	_____	_____	_____

Briefly describe your HONR 499 thesis topic.

Student Printed Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**It is the student's responsibility to submit this form to the School of Kinesiology departmental representative.**