



**WRIGHT STATE**  
**UNIVERSITY**

# UNIVERSITY HONORS PROGRAM

## FULFILLMENT OF DEPARTMENTAL HONORS REQUIREMENTS

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date of Graduation

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
UID

Student has completed or is expected to complete all requirements for graduation with Honors in:

\_\_\_\_\_  
Department

**Anticipated Completion Date:** \_\_\_\_\_

To graduate with Honors, this student has done the following: (please list any special courses, examinations, independent studies, or Honors theses/papers.).

- 1.
- 2.
- 3.
- 4.

\_\_\_\_\_  
Honors Project Title

\_\_\_\_\_  
Faculty Project Advisor (*for program recognition*)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Department Chair

\_\_\_\_\_  
Signature

**Return to the University Honors Program (243 Millett Hall).**