

Honors Transfer Program Completion Record

Name:	Date:
Student ID#:	
Email:	
Phone number:	

Honors courses:

Please attach your unofficial transcript to this form.

Semester	Grade
	Semester

Please list the institutions for which you will be applying or have been accepted to:

University and the major you applied under:	Accepted	Attending

I give my permission for the Honors Transfer Program Coordinator/Counselor to review my transcript: **Student Signature**

Return this form to the Honors Transfer Program Office – TC 129 or email to jmillerthayer@citruscollege.edu

Honors Transfer Program Action:		
Complete	In Progress	Denied