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UNIVERSITY OF SOUTHERN INDIANA
Honors Program
Grade Report Form

Student Information:

Name: _____ _____ ID#: _____
Last Name First Name

Professor Information:

Name: _____ _____
Last Name First Name

Department: _____ Phone #: _____

Course Information:

Circle One: Ad hoc Honors contract course Cross-listed Honors contract course

Term: Fall Spring Summer I Summer II Summer III Year: _____

Course prefix & #: _____Section #: _____ Title: _____

Honors Contract Grade Certification:

Please be sure to provide the grade the student received for the course
AND
the grade the student received for the Honors component.

The student has successful completed the course listed above.

Course Grade (check one): ☐A ☐B+ ☐ B ☐ C ☐ D ☐ F ☐ INC

The student has successfully completed the Honors component in the course listed above.

Honors Component Grade (check one): ☐A ☐B+ ☐B ☐C ☐D ☐F ☐ INC

Grade Report Form Due:
The Monday that course grades are due for the semester.
Extensions must be approved by the Honors Director.

Professor's Signature & Date: _____ ____/ ____/ ____