

A P P L I C A T I O N	Frostburg State University Honors Program				Term _____ Year _____	
	<i>Please Type or Print Neatly</i>					
	HONORS COURSE ENHANCEMENT PROPOSAL FORM					
	STUDENT NAME: Last		First	Middle	Cumulative GPA	PAWS ID
	COURSE NO.	Section No.	Course Title			
	INSTRUCTOR NAME					
	TITLE OF ACTIVITY:					
	DESCRIPTION OF ACTIVITY: _____ (Attach paper if more space is needed)					
	INSTRUCTOR'S explanation of how this project is over and above the regular course work in accordance with criteria on back of contract.					
	_____ Student Signature		_____ Date	_____ Honors Program Director		_____ Date
_____ Instructor		_____ Date				
White Copy - Instructor		Yellow Copy - Honors Program		Pink Copy – Student		

To finalize the enhancement process the student must fill out the Honors Course Enhancement Completion Form, have it signed by the director of the Honors Program and the professor of the course, and submit a copy of the work to the Honors Program.