

Frostburg State University Honors Program

Term _____ Year _____

Please Type or Print Neatly

HONORS EXPERIENTIAL LEARNING (EL) PROJECT PROPOSAL FORM

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STUDENT NAME: Last	First	Middle	Cumulative GPA	PAWS ID
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INSTRUCTOR SUPERVISING PROJECT

TITLE OF EXPERIENTIAL LEARNING PROJECT:

DESCRIPTION OF EXPERIENTIAL LEARNING PROJECT: _____
(Attach paper if more space is needed)

Explanation of how this project warrants three academic credits:

Student Signature _____ Date _____ Honors Program Director _____ Date _____

Instructor _____ Date _____

White Copy - Instructor Yellow Copy - Honors Program Pink Copy – Student

To finalize the experiential learning project process the student must fill out the Honors Experiential Learning Project Completion Form, have it signed by the director of the Honors Program and the instructor of the course, and submit a copy of the work to the Honors Program.