

# Eastern Illinois University

## DEPARTMENTAL HONORS PROGRAM APPLICATION

Department \_\_\_\_\_ Date \_\_\_\_\_

Major(s) \_\_\_\_\_ Minor(s) \_\_\_\_\_

Name \_\_\_\_\_ E-number \_\_\_\_\_  
Last First MI

Local Address \_\_\_\_\_ Phone \_\_\_\_\_

Home Address \_\_\_\_\_ Cell Phone \_\_\_\_\_  
street

\_\_\_\_\_ Gender \_\_\_\_\_  
city state zip code

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

Eastern Illinois University Grade Point Average \_\_\_\_\_

Major Grade Point Average \_\_\_\_\_ ACT Score \_\_\_\_\_ Expected Date of Graduation \_\_\_\_\_

Hours of EIU Course Work Completed \_\_\_\_\_ Class Standing (sophomore, junior, senior) \_\_\_\_\_

<u>Departmental Honors courses to be completed</u>	<u>Credit hours</u> (Must total at least 12 hours)*	<u>Semester to be completed</u> (semester/year)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\*Or as designated by the department.

\_\_\_\_\_  
 Student Signature Date

\_\_\_\_\_  
 Department Coordinator Signature Date

\_\_\_\_\_  
 Dean of Honors College Signature Date

\*\*Please send to: EIU Honors College - Departmental Honors  
 600 Lincoln Avenue - Booth House  
 Charleston, IL 61920