



Honors Transfer Program Completion Record

Name: _____ Date: _____

Student ID#: _____

Email: _____

Phone number: _____

Honors courses:

Please attach your unofficial transcript to this form.

Course	Semester	Grade

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 – ES 614 or email to jmillerthayer@citruscollege.edu

Honors Transfer Program Action:		
Complete	In Progress	Denied