

**Graduation with Latin Honors: Preliminary Form**  
(Students entering U of M fall 1999 and later)

**Directions**

This form is intended to give the IT Honors Program office preliminary information about how you plan to complete the experiences required for the Latin honors degree you are pursuing. It is subject to change with appropriate approval.

You can obtain a description of the current honors requirements by contacting your department's faculty honors representative. Before commencing work, you should discuss with your honors representative what you plan to do.

**The IT Honors Program office must also approve your plan. Please return this form with your faculty honors representative's signature and an unofficial copy of your transcript to 136 Lind Hall.**

**Student Data**

Name \_\_\_\_\_ ID # \_\_\_\_\_  
Address \_\_\_\_\_ Term/Year Entered U of M \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Term/Year of Graduation \_\_\_\_\_  
Email Address \_\_\_\_\_ Major(s) \* \_\_\_\_\_  
Phone Number(s) \_\_\_\_\_

(\* If you plan to graduate with honors from more than one department, please complete a separate form for each honors degree.)

**Level of Honors Being Attempted:** \_\_\_\_\_ *cum laude* \_\_\_\_\_ *magna cum laude* \_\_\_\_\_ *summa cum laude*  
(*Cum laude* requires 1 honors experience; *magna cum laude* requires 2; *summa cum laude* requires 3.)

**Honors Experiences**

Please list below the work you plan toward fulfilling the honors experience requirements.

Experience	Term/Year
Experience	Term/Year
Experience	Term/Year

**Thesis**

If you plan to complete your thesis in conjunction with a specific course, fill in the blanks below.

Department	Course # and Title	Term/Year
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If you plan to write your thesis independently of related coursework, please describe briefly below.

\_\_\_\_\_  
\_\_\_\_\_

**Signatures**

(Signature indicates approval of all work represented on this form.)

Faculty Honors Representative \_\_\_\_\_ Date \_\_\_\_\_

Honors Office Representative \_\_\_\_\_ Date \_\_\_\_\_