## HONORS OPTION AGREEMENT

Student Name:		
PID:		_
Course Number:		
Semester: Fall	Spring Su	ımmer
Year:		
Type of Project (check all applied	cable):	
☐ Independent fie	ld research	
☐ Laboratory rese		
☐ Group discussion ☐ Class presentati		
☐ Additional writt		
☐ Additional reading		
□ Other		
Description of Project (be very s	specific):	
Number of Professor/Student me	eetings (specify per term, p	per week, etc.):
		Student further agrees that if the project is not completed by the dual arrangements have been made in advance.
Student agrees to notify Professor as ed	arly as possible if Student will no	ot finish the Honors Option for any reason.
Professor agrees that the merit of the p	roject and/or the timelines of its	completion will not affect Student's course grade in any fashion.
Professor agrees not to alter the requir	rements of the project after the si	gning of this agreement.
Student Signature		Date
Professor Signature		Date