APEX Final Approval Form
Commonwealth Honors Project

_____________________________________       _____________________     ______________

Project Title: ___________________________________________________________________

APEX Affirmation
This Commonwealth Honors APEX has been submitted, defended, and approved in accordance with the policies of the Commonwealth Honors Program and the University of Massachusetts Dartmouth Honors College.

Approvals
Please PRINT NAME, sign and date. Remember that at least one committee member is required.

Primary Advisor: ____________________________
Print  Sign  Date

Committee Member: ____________________________
Print  Sign  Date

Committee Member: ____________________________
Print  Sign  Date

Department Chair: ____________________________
Print  Sign  Date

Honors Director: ____________________________
Print  Sign  Date

Additional Information
Date and venue (example: Honors poster event) of public presentation (required component)

________________________________________________________________________________________

Course(s) used for APEX work and semesters: ______________________________________________

________________________________________________________________________________________