



HONORS CONTRACT COMPLETION FORM

Name: _____ Class: _____

UMass ID: _____ Major: _____

Campus/Local Address: _____ Phone: _____

E-mail: _____

Term: Fall _____ Spring _____ Intersession _____ Summer _____

Course Department, Course Number, and Section Number: _____

Course Title: _____

Course Instructor: _____

Project Title: _____

SECTION TWO: to be completed by the instructor

The quality of the work submitted for this Honors contract was

_____ satisfactory _____ not satisfactory

COURSE INSTRUCTOR'S SIGNATURE: _____

Submit this form, signed by the course instructor, to the Honors Center (Library 214).

Attach a copy of your written, recorded, or visual work. The signed form and accompanying materials must be submitted by the following deadline:

Fall 2018: **3:00 PM** on **Tuesday, December 18**

Spring 2019: **3:00 PM** on **Thursday, May 9**