**ACADEMIC HONORS PROGRAM APPLICATION**

Academic Honors Program Name: Environmental Science

Student Name: Click here to enter text. 700#: Click here to enter text.

Student Phone Number: Click here to enter text. CMU Email: Click here to enter text.

Academic Honors Faculty Advisor: Click here to enter text.

By signing below, I am agreeing to supervise this student’s honors project and I support their application to the Academic Honors Program in Environmental Science.

 Faculty Advisor Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

Academic Department Head Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_