

# Southern Illinois University Honors Program

## Application Form

Full Name: \_\_\_\_\_ Dawgtag: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Permanent Street Address: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Gender: \_\_\_\_\_ Ethnicity: \_\_\_\_\_ Veteran: Yes ☐ No ☐

ACT Composite Score: \_\_\_\_\_ SAT Total Score: \_\_\_\_\_

High School Attended: \_\_\_\_\_ GPA: \_\_\_\_\_

Other Colleges Attended: \_\_\_\_\_ Dates: \_\_\_\_\_

\_\_\_\_\_ Dates: \_\_\_\_\_

Hours transferred from other institutions \_\_\_\_\_ Transfer GPA \_\_\_\_\_

Do you have an Associate's degree? \_\_\_\_\_ From what institution? \_\_\_\_\_

Academic College \_\_\_\_\_ Year (circle one) Freshman Sophomore Junior Senior

SIUC Major: (1) \_\_\_\_\_ (2) \_\_\_\_\_ SIU GPA \_\_\_\_\_

Date of Entry to SIUC: \_\_\_\_\_ Expected date of graduation: \_\_\_\_\_

State of Legal Residency \_\_\_\_\_ Country of **Citizenship** \_\_\_\_\_

I am (check all that apply):

☐ receiving the Dean's Scholarship ☐ receiving the University Excellence Scholarship

☐ receiving the Chancellor's Scholarship ☐ receiving a need-based scholarship ☐ a first-generation student

What is the highest degree you plan to pursue?

☐ Bachelors ☐ Masters ☐ M.D. ☐ Ph.D. ☐ Other \_\_\_\_\_

Other than English, list any **languages** you speak fluently:

\_\_\_\_\_

In one or two sentences, describe your **career goal**:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## ACADEMIC INFORMATION

Briefly list reasons why / how did you choose your **major(s) and minor(s)**?

- 
- 
- 
- 
- 

What are your **academic interests beyond your concentration(s)**? In what way(s) do you pursue these interests?

- 
- 
- 
- 

List **academic / service honors and recognitions** received during your high school or college years (awards, scholarships, honor societies)

- 
- 
- 
- 
- 

## EXTRACURRICULAR & SERVICE ACTIVITIES

**Academic involvement**—e.g., student government, residential life, social/cultural clubs & associations, committees, volunteerism, athletics, creative/performing arts (indicate duration of involvement, offices/positions held, major contributions, etc.).

- 
- 
- 
- 
-

**Community activities**—e.g., community service, leadership training, etc. (indicate what type of group or activity, duration of involvement, your level of participation, impact of your contribution).

- 
- 
- 
- 
- 

What are your **hobbies and special interests**? How long have you been engaged in these pursuits and how often do you engage in them now?

- 
- 
- 

How did you hear about the University Honors Program?

---

**Signature:**

**Date:**

---

Revised: 03/13/2023

**Return Completed Application to University Honors Program via:**

**Email: [honors@siu.edu](mailto:honors@siu.edu)**

**Fax: (618) 453-2831**

**\*Mail: 605 Agriculture Drive, MC 6532, Carbondale IL 62901**

**\*In Person: Morris Library Room 180**



## Letter of Commitment

As a member of the University Honors Program, I commit to the following:

- Completing 18 hours\* of UHP-approved course work (this may include up to 6 hours of AP credits or Honors courses taken at other post-secondary institutions). The total number of hours must include one UHON351 course and may include a 3-credit senior project or thesis under the direction of a faculty member.
- Maintaining a cumulative grade point average of 3.3 or higher on all SIUC coursework at graduation.
- Meeting with my Honors mentor at the beginning of each semester.
- Spending 20 hours per academic year in volunteer work in service to the local community.

\* Transfer students with an Associate of Arts or Science degree and current SIU Junior/Senior year students must complete a minimum of 12 hours of UHP-approved coursework.

I realize that if my grade point average falls below a 3.3 for more than one semester (consecutively), if I fail to make satisfactory progress towards completing the Honors Certificate, or if I fail to meet with my Honors mentor, I will forfeit my membership in the UHP, including all associated benefits.

---

Signatures:

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

UHP Director: \_\_\_\_\_ Date: \_\_\_\_\_