SMITH COLLEGE
APPLICATION TO ENTER DEPARTMENTAL HONORS CLASS of 2025 & 25J

Student Name ______________________________________. ID# 99_____________________
Email ____________________________  Cell phone __________________ Class Year:_______

Print the three-letter abbreviation of your department/program (for example BIO) in front of the correct course – not all courses are available in all departments, check the course catalog.

_________ 431: one-semester honors project course – fall semester only (8 credits)
_________ 430D: year-long honors project course (8 credits)
_________ 430D: one-semester honors project course upgrade from 1st semester special studies or seminar in major (4 credits)
_________ 432D: year-long honors project course (12 credits)
_________ 432: one-semester honors extension (1 credit – Engineering Dept. only)

Proposed Title of Honors Project: __________________________________________________

______________________________________________________________________________

*Read and complete the required “HONORS CHECKLIST” on the next page before obtaining the necessary signatures below:

TO BE COMPLETED AND SIGNED BY HONORS ADVISER/S

Thesis Project Adviser signature:___________________________________________________.
Print name:____________________________________________________________________Date:__________________________.

Second Adviser signature (if you have one) :_______________________________________
Print name:___________________________________________________________________Date:__________________________.

TO BE COMPLETED AND SIGNED BY THE DEPARTMENTAL DIRECTOR OF HONORS

The Department: APPROVES _____ or DENIES _____ this application.
Percentages used in computing the final honors designation:
Grades in Major: _____ (20%-30%) Thesis: _____ (50%-60%) Honors Exam: _____ (10%-20%)

Signature of Director of Honors:__________________________________________________
Please Print Name of Director of Honors:___________________________________________

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Subcommittee action (circle one): APPROVED or DENIED  Date:_____________________
Signature-Chair, Subcommittee on Honors and Independent Programs: __________________________
*HONORS CHECKLIST*
(required)

_____ The honors course I chose above exists in the course catalog in my department.

_____ I have certified by email to honors@smith.edu or by campus mail to College Hall 101 that I have not received a sanction from the Honor Board that resulted in a grade reduction of 1/3 of a grade or more in my sophomore, junior or senior year that would disqualify me from departmental honors.

_____ I have read the guidelines for departmental honors in my major and I know the requirements and important deadlines.

_____ I am attaching a copy of my project proposal, bibliography, and the completed and signed “Calculation of GPA Form” to this form.

_____ I am ☐ or I am not ☐ applying for funds from the Nancy Kershaw Tomlinson Memorial Fund. (If you need funding be sure to fill out the Tomlinson funds budget request form and submit with this application – be sure to read the guidelines for funding first here www.smith.edu/about-smith/class-deans/thesis-funding .

_____ If I am working with human subjects, I have applied for and received permission from Smith’s Institutional Review Board. If you are not sure if you need permission see http://www.smith.edu/irb/. If you are in the process of obtaining permission but have not yet received it, please check here ☐.

_____ I am aware that an appointment with an appropriate librarian is possible to make (but not required) and should be made no later than the 6th week of classes of the first semester of the thesis project. Appointments can be made by going here: http://libguides.smith.edu/theses.

Student Signature: ________________________________ Date ____________
(Required)