

# Honors in Psychology

## Student Declaration Form

Student Name: \_\_\_\_\_

SUID: \_\_\_\_\_

Email: \_\_\_\_\_

GPA: \_\_\_\_\_

CREDIT HOURS EARNED: \_\_\_\_\_

I have read and understand the requirements for completion of Honors in Psychology.

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

**THIS FORM MUST BE SIGNED BY YOUR ADVISOR AND DR. BERTRAM IN ORDER TO OBTAIN HONORS CREDIT**

\_\_\_\_\_  
Dr. Bertram                      Date  
Honors Co-chair

\_\_\_\_\_  
Advisor                      Date