



Department of Sociology
HONORS PROGRAM APPLICATION

Date: _____

Name: _____ ID#: _____
Last First

Mailing Address: _____

Phone: _____ Email: _____

Anticipated Graduation Quarter/Year: _____

Advisor's Endorsement

I agree to advise this student as s/he conducts research and completes her/his honors project.

Signature of Faculty Advisor Date

Optional: Signature of Secondary Advisor Date

Faculty Advisor (Printed Name)

Faculty Advisor (Printed Name)

Department

Department

Prospective candidates must submit the complete application to the Sociology Department not later than the end of the 4th quarter before graduation (typically Spring Quarter of the junior year).

*Please attach a short summary of the thesis project you are proposing, including an abstract and brief outline, and a copy of your transcript. **Submit to Morgan Speer, Undergraduate Student Services Administrator, in Bldg. 120, Rm. 160C. If you have any questions please email mspeer@stanford.edu***

For Office Use Only

Sociology GPA (B+/3.3) _____

Total GPA (B/3.3) _____

_____ Accepted

_____ Denied

Signature of Undergraduate Studies Chair Date