

Application for Health Sciences Departmental Honors

Truman State University

If you have difficulties completing this form online, you can print a blank form and fill it out by hand.

Date		Email	
Name		Banner ID #	
Major(s)		Graduation Date	
1. What is your cumulative GPA today?			
2. What is your major today?			

3. Have you completed and disseminated at least one research project while an HS major? If so, please list the title of the HS-related research project, other researcher team members, and mentor(s) below:

Project Title:	
Other Research Team Members (If applicable)	
Faculty Mentor(s)	

Please provide the name and signature of HS faculty who verifies you were a major contributor of the above research project. *A major contributor is one who participated substantively in multiple parts of the project (design, data collection, data analysis, and preparation of the manuscript, poster or presentation for dissemination of the research).*

Print Name: _____ Signature: _____

Conference/presentation location or journal name (manuscripts submitted for publication qualify):	
Date of presentation, manuscript submission, or year volume, and issue of published article: (<i>Note: the presentation must occur after the project is complete.</i>)	
4. Please indicate the date on which you passed your senior test (CHES, EP-C)	

I attest to the best of my knowledge that the information provided above is true and correct. In addition, I understand that the Department of Health Science Office will verify all information, and that it will only be used for consideration of Health Science Department Honors.

Student Signature: _____ Date: _____

Submit form to Department of Health Science, PB2104, deniceb@truman.edu, 660-785-4456