

# REGIS COLLEGE HONORS PROGRAM APPLICATION

This application should be completed in its entirety and submitted by the stated deadline. Incomplete applications and those that are submitted past the deadline will not be considered.

Semester	Date:	
Contact Information:		
Name:		
Last	First	M.I.
Phone:	Regis Email:	
Local Address:		
Street or Residence Hall	Apt. or Room Number	
City State Zip		
Class Year:		
Academic Major:		
Faculty Advisor:		
Application Checklist		
The following materials s	should be included in your application pa	acket.
Please refer to this check	klist before submitting.	
□ Completed application	form, Sections One through Five	
□ Original graded paper	or piece of other student work with gra	ade received.
□ Honors application ess	say ( <u>See essay questions in Section </u> ]	<u>Γwo</u> )
□ Unofficial Regis Colleg	e academic transcript	
□ Regis faculty member	recommendation – provide them a reco	ommendation form and
ask them to submit it to 0	CH341 in a sealed envelope. ( <mark>Applicati</mark>	ions are incomplete
without recommendation	<u>on</u> )	
□ Signed waiver of rights	3	

#### **Section One**

Submit an original graded paper or piece of other student work, showing grade received. You may submit studio art, graphics, computer design, science labs as well as an academic essay. We will return any personal materials you have submitted. Please indicate if you would like us to save any of your submissions.

Submission \_\_\_\_\_\_

#### **■** Section Two

Answer the following questions in an essay of approximately three pages in length.

- How have you grown as a scholar so far at Regis?
- What leadership, professional development, and mentorship do you hope to gain from participating in the Honors Program?
- What skills, interests and/or perspectives will you bring to the Honors Program community?
- To what extent have you participated in service opportunities and if not, how would being in the Honors Program enrich your desire to serve?

#### **■** Section Three

Submit your transcript. You may print a copy from your Regis Access page. **Ensure that your full name is on the transcript.** 

#### **■** Section Four

Ask **ONE** Regis faculty member who knows you well as a student to write a recommendation.

Please print the name of the faculty members who will be recommending you.

1. \_\_\_\_\_\_

#### **■** Section Five

Submit Waiver of Rights to see faculty recommendation.

Faculty recommendations are to be sent directly to Dr. Michelle Cromwell, Director of the Honors Program in CH Room 341. Deadline to submit your application: February 15 and September 30, for consideration in the fall and spring semesters respectively.

## To be completed by applicant

■ Applicant Information

Applicant: After filling in	your name and address be	low, please have a Regis
faculty member comple	te the remainder of the form	and send it directly to the
Director of the Honors F	Program in CH Room 341.	
Name:		
Last	First	M.I.
Local Address:		
Street or Residence Hall Apt. or Room N	lumber	
City	State	Zip
Phone	Regis Email Addr	ess
☐ I waive my right to se	ee the faculty recommendat	ion.
☐ I do not waive my rig	th to see the faculty recomr	mendation.
Student Signature		
To be completed by th	ne Faculty Member	
The Honors Program A	dvisory Board finds candid	evaluations essential in
assessing an applicant'	s potential for success in the	e Honors Program. We are
particularly interested in	n having your observations o	of the applicant's academic
and personal performar	າce in your class. Thank yoເ	ı for your help. <b>Please send</b>
this evaluation to Micl	helle Cromwell, Director o	f the Honors Program,
CH341.		
■Background Informa	ation	
How long have you kno	wn this student and in what	context?

What are the first words that come to your mind when describing this	
student?	
List the courses in which you taught this student:	

### ■ Ratings

Compared to other Regis students whom you have taught, how does the applicant rate in terms of academic skills and potential?

Please mark the appropriate boxes below:

	Below Average	Average	Good	Excellent	Outstanding
Energy and Initiative					
Ability to Work Independently					
Fulfills Goals Set for Self					
Works to Capacity					
Oral Expression					
Written Expression					
Originality					
Social Maturity					
Concern for Others					
Self- Confidence					
Dependability					
Classroom Participation					
Disciplined Work Habits					
Desire to Embody the CSJ Mission					
Intellectual Curiosity					
Respect for Others					

## **■** Evaluation

Please include a description of this student's academic and personal
characteristics. We welcome information that will help us to differentiate this
student from others.
I recommend this student:
□with reservation □fairly strongly □strongly □enthusiastically with no reservations
■Signature
Submitted by:
Signature
Printed Name
Signature Date