



Honors Program Application

Full Name _____

Date of Birth (MM/DD/YY) _____

ECC Student ID Number (7-digits) _____

Address _____

City _____ State _____ ZIP _____

Phone number _____

Personal Email _____

ECC Student Email _____

High School Information

Name of School Attended _____

Graduation Year _____

Final Grade Point Average (GPA) _____

Class Rank (_____ of _____)

ACT or SAT composite score _____

Prior College Information (if applicable)

College(s) Attended _____

Years Attended _____

Number of college-level credit hours completed _____

Cumulative GPA _____

When do you plan to join the ECC Honors Program? Check one and enter year

Summer

Fall

Spring

Year _____

Submission of this application indicates my desire to become a member of the Elgin Community College Honors Program. I recognize that with this membership I will be expected to enroll in honors classes and meet the Honors Program requirements. If accepted to the program, I will familiarize myself with the program expectations outlined in the Honors Program Handbook available at www.elgin.edu/honors.

Student Signature _____

Date _____

Save completed application form to your computer then email it to honors@elgin.edu.

Applications are processed within two business days when the ECC admission application and necessary transcripts are on file with the College. Direct application questions to Marge Rowe at 847-214-7328.