University of California, Santa Barbara
College of Letters and Science
College Honors Program

REQUEST TO CANCEL HONORS CONTRACT

This form must be completed and signed by both the student and the instructor during the quarter in which the honors contract is undertaken. Return to the College office, 1117 Cheadle Hall.

STUDENT'S NAME: LAST _____ FIRST _____ MIDDLE _____ PERM # _____

E-MAIL ADDRESS _____ PHONE # _____ QUARTER _____

TO BE COMPLETED BY THE STUDENT

REQUEST TO CANCEL HONORS CONTRACT FOR:

COURSE: _____ INSTRUCTOR: _____
DEPARTMENT COURSE #

WHY DO YOU WANT TO CANCEL THIS CONTRACT?

_____
STUDENT'S SIGNATURE DATE

TO BE COMPLETED BY THE INSTRUCTOR

DO YOU OBJECT TO THE REQUESTED HONORS CONTRACT CANCELLATION? ☐ NO ☐ YES

COMMENTS:

_____
INSTRUCTOR'S SIGNATURE DATE

College of Letters and Science Honors Program
University of California, Santa Barbara
Santa Barbara, CA 93106-2080

honorsmail@LTSC.ucsb.edu
www.honors.LTSC.ucsb.edu