HTP COMPLETION FORM

Update this form each time you complete an HTP requirement, and submit it to the HTP office in November of your final year at ECC. Submit this form <u>right</u> <u>after you register for your fifth honors course</u>, even if you have not yet completed all seminars and counseling appointments.

PLEASE PRINT:	ECC St	udent ID #	ECC	ECC Email				
Last name			First name	Middle name				
Mailing address: _								
_			City		Phone #			
HONORS COURS Courses Complete	ed	Semester		Courses In Progress	Semester			
				Courses Planned	Semester			
	accurato	e names and d		you have attended so far):				
				Date _				
-				Date _				
				Date _ Date _				
·				documentation as described				
Counselor				Date _				
Counselor				Date _				
Universities applie	d to (list	ed in order of p	reference):					
First semester/yea	ır at univ	ersity will be: _	Pla	nned university major:				
Print your name ex	xactly as	you would like	to see it printe	ed on your HTP Award of Achie	evement:			
Signature:				Date:				

THIS SIDE IS FOR HTP OFFICE USE ONLY

Transferable units and UC transferable GPA to be determined by transfer counselor.

COLLEGE NAME	TRANSFERABLE NUMBER OF UNITS								
El Camino College	-	•			Overall GPA				
The information below	is current thr	ough	(semester	/vear)	:				
Semesters in HTP	UC	Transferable (Cumulative GP/	A			
Total Number of Hono									
Number of Seminars/	Alternative Ac	tivities	_ Number of	Counse	eling Appointme	ents			
Reviewed on:		(date):							
Comments:									
Program Completed: Semester/Year									
Final GPA	Transfer University								