

**HONORS PROGRAM APPLICATION
FOR CURRENT & TRANSFER STUDENTS**

Lake Land College Honors Program
5001 Lake Land Blvd, Mattoon, IL 61938-9366
Office: 217-234-5042 Fax: 217-234-5025
honors@lakelandcollege.edu



LAST NAME	FIRST NAME	ID NUMBER
ADDRESS	CITY/ST/ZIP	GRADUATION DATE
TELEPHONE	EMAIL ADDRESS	
ACADEMIC PROGRAM/EDUCATIONAL INTEREST		CURRENT GPA

TRANSFER STUDENTS:

College/university attended: _____

Number of credit hours completed: _____ GPA: _____

For courses completed at another college, you must also send an official transcript to the Lake Land College Admissions & Records Office, 5001 Lake Land Blvd., Mattoon, IL 61938. **Please attach an unofficial copy of your transcripts with this application.**

How did you hear about the Lake Land College Honors Program?

- | | |
|--|--|
| <input type="checkbox"/> Lake Land College website | <input type="checkbox"/> Current Lake Land College student |
| <input type="checkbox"/> Laker Visit Day | <input type="checkbox"/> Lake Land College faculty member/employee |
| <input type="checkbox"/> Brochure | <input type="checkbox"/> Postal mail/email |
| <input type="checkbox"/> WYSE competition | <input type="checkbox"/> Other: _____ |

Was the Honors Program a factor in your decision to enroll at Lake Land College? Y N

I, the student, acknowledge that the information given on this application is accurate and can be verified. I know that to be considered for the Lake Land College Honors Program I must be planning to pursue an Associate Degree and must submit this completed application to the contact information listed above.

STUDENT'S SIGNATURE	DATE
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