



THE OHIO STATE UNIVERSITY

College of Arts and Sciences

Graduation with Distinction

Arts Honors and Distinction Program

Please submit the completed form to Ed Quinn (quinn.142@osu.edu) at least two weeks before commencement.

Date _____

Student Name _____
(Signature) (Printed Name)

Field of Distinction _____

Title of Distinction Project _____

Pass _____ Non Pass _____

Faculty Committee Members Signatures:

Faculty Project Advisor:

(Date) (Signature) (Printed Name)

Faculty Committee Member:

(Date) (Signature) (Printed Name)

Faculty Committee Member:

(Date) (Signature) (Printed Name)