CIS 4914 -- SENIOR PROJECT APPLICATION FORM -- SUMMER 2002

Your Name _____

Your SSN _____ **Your Status (e.g., 4EG)** _____

Your Email Address: _____

Brief Description of Your Project:

_____

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What Computer Languages will you use? _____ _____ _____

What Software Packages will you use? _____

. . . . . Advisor and Student to complete data to dotted line . . . . . .

Advisor's Name: _____ **Advisor's Phone:** _____

Advisor's Email: _____

Advisor's Address: _____

Advisor's Signature: _____ **Date:** _____

. . . . . Course Coordinator to complete data below this line . . . . . .

Course Coordinator's Signature: _____