

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

Your Name _____

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

Your Email Address: _____

Brief Description of Your Project:

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: _____