

Computer Science Qualifying Project Agreement Form

Student Name: _____

Project Supervisor Name: _____

Start Date: _____

Proposed Approximate Completion Date: _____

Proposed Topic (short paragraph):

Proposed Milestones/Goals:

Student Signature: _____

Supervisor Signature: _____

Department Signature: _____
(required for supervisors outside of JHU)

Instructions: the student should fill out this form in consultation with the project supervisor and email it to Kim Franklin - kimfranklin@jhu.edu, CC'ing the project supervisor as well as primary advisor(s), if different. Digital or physical signatures are acceptable.

Note: Supervisors must have a doctoral degree. Those external to JHU are required to submit a copy of their CV along with this form for pre-approval.