

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: _____

Instructions: the student should fill this form out in consultation with the project supervisor and either bring it in-person, or email it to Zack Burwell – zburwel1@jhu.edu, CC'ing the project supervisor as well as primary advisor(s), if different. Digital or physical signatures are acceptable.