University at Buffalo

Department of Computer Science and Engineering

Research/ Honors Track - Project form

Student Name:_____

Person Number:_____

Graduation Semester (year): Fall_____   Spring_____ Summer_____

Title of Master Project:_____

Faculty advisor (please print):_____

Description of Master's Project:

Did you submit a written Project to your advisor based on the guidelines in the handbook?:

　　　Yes ____

　　　No ____

CSE Technical Report ID # (After Uploading to the CSE Portal):_____

Date of Demo Day Presentation? _____

Student Signature: _____   Date_____

I certify that I have reviewed the document above and have given my consent to it being uploaded to the CSE technical report portal.

Faculty Advisor Signature: _____ Date_____