CULMINATION PROJECT AGREEMENT
Submit signed copy to your ENT 4499 Professor
1. Student Name: Jordin De La Rosa
2. Phone number: 347-419-0559
3. Email: jordindlrosa@gmail.com
5. Title of the project. Sirena

6. This Agreement is entered into between:
Student's name: _Jordin De La Rosa
Faculty advisor: Allison Berkoy
Technical advisor: Hosni Auji

1. This is an agreement whereby grade and credit for ENT 4499 will be awarded in return for specified project efforts. It is agreed that all work described in this Agreement will be completed as scheduled and within the cost total and other parameters as noted.
2. Student will meet with the technical adviser at least 3 times throughout the course of the project.
3. Failure to maintain the agreed-upon plan and schedule may result in grade penalties. Failure to submit the complete project and report by the scheduled date will result in failure of ENT 4499
4. You will provide both your advisor and technical advisor with a copy of your proposal which will include the following:
    - Project description
    - Methods
    - Project Deliverables
    - Schedule or calendar
    - Required Resources
    - Budget
    - Proposed table of contents/Portfolio Outline
    - Culmination Project Agreement (this page)

Technical Advisor's Statement: I agree to serve as Technical Advisor for this culmination project and will participate in the evaluation as appropriate.

_____ 02/02/2022
Technical Advisor Signature Date

Student's Statement: I fully understand the Project description, the Procedure, and the agreed-upon contributions of my Technical Advisor and others who may be involved in this Agreement. I agree to meet all requirements and to request, in writing, any significant changes, which may become necessary during this Culmination project. Any such request will become valid and a part of this Agreement/Contract when accepted by my Faculty Advisor.

Jordin De La Rosa 5-16-2022
Student Signature Date