CULMINATION PROJECT AGREEMENT	
Submit signed copy to your ENT 4499 Professor 1. Student Name: Vil 9 110 Samo III. 2. Phone number: District Samo III.	
3. Email: Virginio, Samaini OMPil. City+eCh. CUNY, etch. 5. Title of the project. Devision	
6. This Agreement is entered into between: Student's name: Vivgilio Samo III Faculty advisor: Termo	
Technical advisor: Atxage Icos	
 This is an agreement whereby grade and credit for ENT 449 awarded in return for specified project efforts. It is agreed the described in this Agreement will be completed as scheduled cost total and other parameters as noted. 	at all work
Student will meet with the technical adviser at least 3 times course of the project.	throughout th
 Failure to maintain the agreed-upon plan and schedule may grade penalties. Failure to submit the complete project and scheduled date will result in failure of ENT 4499 	result in report by the
You will provide both your advisor and technical advisor with your proposal which will include the following: Project description	n a copy of

- 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 culmination project and will participate it	to serve as Technical Advisor for this in the evaluation as appropriate.
_///	2/6/2019
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, 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.

Turgilio 5 amó III 2/6/2019
Student Signature Date