CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO
SCHOOL OF COMPUTER SCIENCE AND ENGINEERING

CSE 482 Senior Interdisciplinary Project
Evaluation of Project

STUDENT:
Name _____ Date _____

Email: _____ SID#_____

Quarter Term CSE 482 Project Was Enrolled _____

Advisor _____

Project Name _____

_____

CLIENT:
Name _____

Affiliation _____

E-mail: _____ Phone: _____

Did the student deliver what was defined in the project proposal? _____

In your opinion, has the student successfully completed the proposed work? _____

Comments, if any:

_____

_____

_____

_____

_____

_____

_____   _____
            Client's Signature   Date