KALAMAZOO COLLEGE

DEPARTMENT OF
COMPUTER SCIENCE
More in Four. More in a Lifetime.

Senior Individualized Project (SIP) Contract

Name_____ ID#_____
(Last) (First) (M.I.)

Student's Signature_____ Date_____

Faculty SIP Advisor's Name _____

SIP Department □ Computer Science □ Joint with _____

Funding_____

Units	Type
☐ 1	☐ Summer
☐ 2	☐ Summer/Fall
	☐ Summer/Winter
	☐ Fall
	☐ Fall/Winter
	☐ Winter

Employment Address and Phone Number (if appropriate)_____

_____

Student's Phone Number(s)_____

**Students are expected to check their K College email regularly throughout the summer.

Please attach a paragraph or two describing your project addressing the appropriate questions from the CS SIP Guide.

Please return this completed contract to the CS/Math/Physics office (203 OU).