<b>PAKI I S</b> tudent Informati	ion"
Date	
Full Name	
CWID	
Major	
Classification	
Warhawks E-mail	
Permanent Mailing Address	
City, State, ZIP	
16	
If you have participated in the p	
List semester(s) when you have	ve participated in the program (ex. Fall 2019,Spring 2020)
List faculty mentor(s) you wor	·ked with (ex. Dr. John Doe)
	Student Signature
<b>PART II</b> Faculty Mentor I	Information*
Date	
Full Faculty Name	
College	
E-mail	
	Faculty Mentor Signature
PART III Project Informa	ıtion*
Title of the project	
Description of the project (please make sure to state what type of the project it is and what is going to be the end product of it. For example, a research paper, performance, etc.)	