**SMEA CAPSTONE PROJECT COMPLETION FORM**

**Capstone Information**

Capstone Project Title:

Faculty Advisor: Email:

Client Advisor: Email:

**Students:**

Name: Student ID#:

Name: Student ID#:

Name: Student ID#:

Name: Student ID#:

Name: Student ID#:

Students listed above have completed the capstone research and analysis and submitted the deliverables as specified in- and agreed upon in the Capstone Project Management Plan dated 2023 (and modified on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_).\*

\*If the original management plan was modified during the duration of the project, please attach a copy of the modified capstone project management plan.

Signature of Client Advisor Date

Signature of Faculty Capstone Advisor Date

**Due to SMEA Graduate Advising Office (MAR 107) on the final Monday of the completion quarter. Please attach the completed capstone deliverable.**