

**SELF-DETERMINED MAJOR FINAL PROJECT:
READER'S COMMENTS**

(Both the primary and the secondary readers of the project must submit their comments to the Director of the Self-Determined Majors Program once the project is completed.)

STUDENT _____ CLASS YEAR _____
TITLE OF PROJECT _____

Final Project Advisor: Please comment on the overall success of the student's self-determined major final project, features of the project that are deserve special attention, and the student's overall accomplishments.

Advisor's signature: _____ Department: _____
Date: _____