



Culminating Project Completion Form

To be completed by the graduate program coordinator. Please list all students who completed their culminating project this semester. Submit the form to the Office of Graduate Studies (gradstud@csusb.edu) by the end of the semester.

Graduate Program: _____ Course No. _____

Term Completed (e.g., Fall 2026): _____ Grad Coordinator: _____

Location of Project Archive: _____

Student Name	Student ID

Students completed their culminating project by the end of the semester listed above. Their graduate project is archived by the graduate program.

Graduate Coordinator Signature

Date