Department of Mechanical Engineering

PROJECT NOMINATION FORM

(Note: Each student is required to complete this form irrespective of whether the student is planning to do a single project or a group project. If you do not submit this form with the required information before the deadline then you will not be allotted a project).

Submit the completed form to: Mechanical Engineering: Dr Ian Davies, Building 204, Room 431
Mechatronic Engineering: Dr Jonathan Paxman, Building 204, Room 533B

Deadline to submit form - 4pm on Friday 7th November 2014 (Final day of semester)

Student Name: ___________________________ Student ID: ___________________________

Course of study (Mechanical or Mechatronic): ___________________________

Project Title: ___________________________

Academic Supervisor: ___________________________
*Must be staff member in the Department of Mechanical Engineering*

Additional Supervisor (Optional): ___________________________
*This might be a supervisor in a different Department or external organisation*

Following discussion with my supervisor(s), this project will require (best estimate at present time):

Laboratory Equipment:
________________________
________________________
________________________

Manufacturing: (Brief description, estimate of manufacturing time & approximate date required)
________________________
________________________
________________________

Technician Assistance: (Brief description of need)
________________________
________________________
________________________

Equipment or Consumable Purchases:
________________________
________________________
________________________

Students should make an assessment of any Health & Safety issues arising from the execution of this project, and provide sufficient information to the Laboratory Manager to allow him to make his own assessment.

Signature of Student: ___________________________ Date: ___________________________

Signature of Academic Supervisor: ___________________________ Date: ___________________________