PROJECT AGREEMENT FORM
Engineering Tripos Part IIB 2017/18

To be taken to the Teaching Office (Office Floor, Baker Building) by Friday 9 June 2017 at the latest.

Please write clearly

Name of Student ................................................................. email: ....................

College ........................................... Director of Studies .................................................................

Project is: Type (a) / Type (b) (delete as appropriate)

Name of Supervisor .................................................................

Short title of project .................................................................

Aims of project (to be filled in by supervisor who should keep photocopy)

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Signature of student .................................................................

Signature of supervisor .................................................................
(indicating a definite commitment to supervise the project)

Workshop facilities needed (please tick):
none O insignificant O significant O

Central computing facilities needed other than word processing (please tick):
none O insignificant O significant O

Any special safety implications .................................................................

IMPORTANT: please give project reference no. _______ eg B-ANO22 7 / B-ANO2-type(b)

NOTE: Each student is responsible for handing in his or her form to the Teaching Office.
DO NOT LEAVE IT WITH A POTENTIAL SUPERVISOR FOR SIGNATURE!