

ENERGY LAB SUPERVISION FORM

Internet of Things, 2025 SoSe

Group Number:

Date:

TO BE FILLED OUT BY STUDENTS

Group members (name, matriculation number):

Name	Mat. Num.

Final Marks: __/25

TO BE FILLED OUT BY SUPERVISOR

Task	Completion Time	Notes
LoRa		
WiFi		

Additional Notes:

Supervisor (name, signature):