Team Name: TBD

Project Title: OnlyFactories

Explain your project and the value of the work you’re doing:

Project Type: Indoor Booth

Will your presentation require electricity? No

Any additional considerations we need to know regarding your project?

Team Members & Departments:

|  |  |  |  |
| --- | --- | --- | --- |
|  | First Name | Last Name | Department |
| Team Member 1 | Keller | Lawson | CS |
| Team Member 2 | Justin | Harris | CS |
| Team Member 3 | Parker | Weisel | CS |

Client or Funding Sponsor(s):

|  |  |  |  |
| --- | --- | --- | --- |
|  | First Name | Last Name | Organization |
| Sponsor 1 | John | Shovic |  |

Instructor(s):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | First Name | Last Name | Department | Email |
| Primary Instructor | John | Shovic | CS | [jshovic@uidaho.edu](mailto:jshovic@uidaho.edu) |

Mentor(s):

|  |  |  |  |
| --- | --- | --- | --- |
|  | First Name | Last Name | Department |
| Mentor 1 | John | Shovic | CS |

Team Project Leader/Primary Contact:

First Name: Keller

Last Name: Lawson

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