Edith Cowan University

School of Engineering

Project Registration Form

Student Number	Surname / Family Name	Given Names
Unit	(please circle one) ENS3201 ENS4152 ENS4253 ENS6126 ENS6127	
Course of Study (e.g. G69 Mechatronics)		
Year / Semester (e.g. 2014 / 1)		
Project Title (If it is a working title, please be as specific as possible)		
Name of Supervisor		
Name of Co-Supervisor (if any)		
Group Project?	Yes / No (please circle) If Yes, please provide names of other students **Every student must individually complete and submit their own project registration form.**	

Signatures:

Student: _____   Date: _____

Supervisor: _____   Date: _____

Co-Supervisor:_____   Date: _____