



## Bachelor of Engineering with Honours Work Experience Form

Student Name:	Daniel Eisen
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This form is signed after completion of work experience. All parts of this form must be completed in English. Information about the work experience programme can be found at <https://www.wgtn.ac.nz/ecs/study/work-experience>.

Both the student and employer should complete and sign this form where indicated. The student must then upload the completed form to the online submission system.

Any queries or problems that arise during the work experience should be directed to the Work Experience Coordinator or the Dean of Engineering.

Work Experience Coordinator	Dean of Engineering
Matt Stevens	Prof. Dale Carnegie
04 463 6209 Fax: 04 463 5045	04 463 7485 Fax: 04 463 5045
Matt.Stevens@ecs.vuw.ac.nz	Dale.Carnegie@ecs.vuw.ac.nz

Employing Organisation:	Robinson Research Institute
Name of employer contact/manager:	Dr Fiona Stevens McFadden
Address of employer:	69 Gracefield Road Gracefield Lower Hutt 5010 New Zealand
Phone and email of employer contact/manager:	04 46 30087 fiona.stevensmcfadden@vuw.ac.nz

Brief job description (1 or 2 sentences):	Summer Engineering Intern. Worked as a part of a team in the development of an integrated GMR sensor system for use in power grid monitoring. This involved signal processing, data-analysis in Python and MatLab, embedded development as well as both digital and analog electronic work for fault simulation and monitoring. Personally my work was a mix of collaboration across different parts of the project, and working independently on the signal processing development and ML labeling, as well as preparing weekly presentations and progress summaries.
Work Experience Type (Practical or Professional)	Professional
Expected dates of employment:	Start: 11 November 2019 Finish: 21 February 2020
Expected hours per week:	40
Total hours of employment:	400
Employer Feedback:  For example: How do you rate the students punctuality, technical knowledge, ability to follow instructions, ability to relate to other staff	
Signature of student:  Date:	
Signature of employer contact or manager:  Date:	

*This form was auto-generated by the work experience system on Mon Jul 6 12:47:42 2020.*