

Physics Educational Laboratory Major Project Request Form

Requested By	Course Number	Date Requested	Date Required	Estimated Cost	Estimated Time	Type Opp or Dev

Name of Project:

Outline the Problem: Please describe the problem you hope this project will solve. Include an relevant background information.

List of Deliverables (scope): Please list all the tangible result that you are expecting from this project.

How involved do you want to be with this project?

1. Consulted daily
2. Consulted weekly
3. Consulted as needed