



MEng Project Application

Student Information

Name: _____ Student #: _____

Program of Study: _____

Course: ECE - SYSC 5900 BME - BIOM 5900
 ECE - SYSC 5903

Tentative Title of Research Project

Project Description

This form must be accompanied by a complete project description, including:

- Deliverables
- Deadlines
- Marking Scheme
- Meeting Schedule

Student's signature: _____ Date: _____

Project Supervisor: _____ Date: _____

Program Advisor: _____ Date: _____

SCE-GFAC: _____ Date: _____