MECHANICAL ENGINEERING and OPERATIONS RESEARCH/INDUSTRIAL ENGINEERING
Project Course Authorization Form

Please submit completed form to Ashlee Vrana in ETC 2.105 or email a scanned copy with faculty signature to ashlee.vrana@austin.utexas.edu.

*Once the restriction is lifted, you must register yourself for this course.*

Name: ____________________________  UT EID: __________________
Course: ___________  Unique Number: ___________  Semester & Year: ___________
Completion Date: ___________  Supervising Professor: _______________________
Reason(s) for interest in the course or topic:
Requirement for Degree: _____  Elective: _____  Other (specify): ________________

**Project Description:**


**Project Objectives:**


**Strategy(ies) for achieving objectives:**


**Criteria for evaluation:**


________________________________________  _______________________
Instructor's Signature  Date

________________________________________  _______________________
Student's Signature  Date