



Department of Electrical Engineering
Undergraduate Research Request Form
EENG 4395

Semester: Fall Spring Summer, 20_____

Circle Semester

Name of Student _____

Student ID # _____

Patriot Email Address _____

Telephone (____) _____

Supervising Faculty _____

Topic of Research _____

Description of Research Topics and Goals:

Additional material can be attached if needed.

Student Signature

Date

Advisor Signature

Date

Faculty Signature

Date

Department Chair Signature

Date

FOR OFFICE USE ONLY

Course Section Enrolled

Permission Number

Class Number