

**MME 9600 Course Enrollment Request Form**

A copy of your proposed program and academic record (unofficial transcript) must be included with the submission of this form to your prospective supervisor.

**Name:** \_\_\_\_\_

**Student Number:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Program of Registration** \_\_\_\_\_

**Area Stream of Project** \_\_\_\_\_

**Faculty Advisor:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Working Title:** \_\_\_\_\_

**Abstract:** \_\_\_\_\_

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**To be completed by MME Program Office**

Date of Registration in MME 9600: \_\_\_\_\_

Cumulative Average: \_\_\_\_\_

Progress Report Due: \_\_\_\_\_

Submission of Final Project: \_\_\_\_\_

Date of Presentation: \_\_\_\_\_

**Approval:**

MEng Associate Chair: \_\_\_\_\_ Date: \_\_\_\_\_

MEng Program Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_