**THE UNIVERSITY OF THE WEST INDIES ST. AUGUSTINE CAMPUS**

**DEPARTMENT OF MECHANICAL & MANUFACTURING ENGINEERING**

**FACULTY OF ENGINEERING**

**IENG 3012/MENG 3019 – FINAL YEAR PROJECT PROPOSAL**

PROJECT TITLE: (IN BLOCK CAPITALS):Click here to enter text.

STUDENT’S NAME: (IN BLOCK CAPITALS) Click here to enter text.

REGISTRATION NO.:(WRITE IN LEGIBLE WAY) Click here to enter text.

RATIONALE: Click here to enter text.

(Need/Justification)

OBJECTIVES: (1) Click here to enter text.

 (2) Click here to enter text.

 (3) Click here to enter text.

 (4) Click here to enter text.

PROJECT SCOPE: Click here to enter text.

ENGINEERING PRINCIPLES/ TOOLS TO BE APPLIED

Click here to enter text.

PROJECT TYPE: Choose an item

STUDENT’S SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mobile Phone: Click here to enter text.

Email: Click here to enter text.

SUPERVISOR’S NAME: Click here to enter text.

SUPERVISOR’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_