

Department of Mechanical and Aerospace Engineering



**PERMISSION TO ENROLL IN MAE 797-ADVANCED DIRECTED RESEARCH (4)**

I, \_\_\_\_\_ verify that I am supervising  
Faculty Name (please print name)

the below-named student in course MAE 797. Please give him/her permission to  
enroll in \_\_\_\_\_ units of MAE 797 for the \_\_\_\_\_ Semester.

Student Name: \_\_\_\_\_

Student I.D. #: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Previously enrolled in MAE 797? \_\_\_\_\_ Yes \_\_\_\_\_ No

# of units previously enrolled in MAE 797: \_\_\_\_\_

**MAE 797 IS REPEATABLE TO A MAXIMUM OF 8 UNITS.**

\_\_\_\_\_  
Student Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Faculty Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Graduate Advisor \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Department Chair \_\_\_\_\_ Date \_\_\_\_\_

**Contact the MAE Administrative Support Coordinator in ECS-635 to submit this form, obtain a course code number, and a permit to register.**