

**California State Polytechnic University, Pomona
Mechanical Engineering Department**

ME 400 Registration Request Form

Part I: To be completed by the student

Last Name: _____ First Name: _____ BID#: _____

Curr. Year _____ Academic Year _____ Quarter: _____ Number of Units*: _____

Please briefly describe the project or task to be performed:

Part II: To be completed by the ME 400 advisor:

The content of this project meets the standards set for a technical elective course.

Advisor Name (Please Print) _____

Advisor Signature _____ Date: _____

Part III: To be completed by the ME Department:

Department Chairs Initials: _____ Assigned Class Number: _____

* Please note that the maximum number of ME 400 units that a student may register for is 2 per quarter and 4 total.