



School of Advanced Manufacturing and Mechanical Engineering

PROPOSAL FOR INDUSTRIAL EXPERIENCE PLACEMENT

Student ID Number	Title (please circle) Mr / Mrs / Miss / Ms
Given Names	Family Name
Full Name of Program	
Contact Email/Phone	

DETAILS OF PROPOSED COMPANY FOR INDUSTRIAL EXPERIENCE PLACEMENT	
Name of Company	
Name and Title of Industry Supervisor	
Contact Email/Phone	
Project/Role	
Proposed Tasks	
Proposed Time Period or Dates for Placement	

OFFICE USE ONLY	
Recommendation from Industry Experience Coordinator	
I recommend that the Student's industrial placement as outlined above is satisfactory and the student may proceed with the placement.	
Signature	Date