

Deadline: 31st October 2012

GRADUATION PROJECT PROPOSAL

PROJECT INFORMATION

Project Name: Click here to enter text.

Project Field: Click here to enter text.

University: Click here to enter text.

Faculty: Click here to enter text.

Department: Click here to enter text.

Project Summary: Please limit this to 250 words. Feel free to attach additional materials if you need to provide more details.

SUPERVISOR INFORMATION

Name: Click here to enter text.

Position: Click here to enter text.

Address: Click here to enter text.

Phone: Click here to enter text.

E-mail: Click here to enter text.

Fax: Click here to enter text.

TEAM MEMBERS*

** Number of members in each team should range from 2 to 6 members*

Member 1:

Name: Click here to enter text.

Mobile: Click here to enter text.

Email: Click here to enter text.

Address: Click here to enter text.

Expected graduation year: Click here to enter text.

GPA: Click here to enter text.

Interest area: Click here to enter text.

Member 2:

Name: Click here to enter text.

Mobile: Click here to enter text.

Email: Click here to enter text.

Address: Click here to enter text.

Expected graduation year: Click here to enter text.

GPA: Click here to enter text.

Interest area: Click here to enter text.

Member 3:

Name: Click here to enter text.

Mobile: Click here to enter text.

Email: Click here to enter text.

Address: Click here to enter text.

Expected graduation year: Click here to enter text.

GPA: Click here to enter text.

Interest area: Click here to enter text.

Member 4:

Name: Click here to enter text.

Mobile: Click here to enter text.

Email: Click here to enter text.

Address: Click here to enter text.

Expected graduation year: Click here to enter text.

GPA: Click here to enter text.

Interest area: Click here to enter text.

Member 5:

Name: Click here to enter text.

Mobile: Click here to enter text.

Email: Click here to enter text.

Address: Click here to enter text.

Expected graduation year: Click here to enter text.

GPA: Click here to enter text.

Interest area: Click here to enter text.

Member 6:

Name: Click here to enter text.

Mobile: Click here to enter text.

Email: Click here to enter text.

Address: Click here to enter text.

Expected graduation year: Click here to enter text.

GPA: Click here to enter text.

Interest area: Click here to enter text.

Please complete this form and submit it by email to: atlc-contacts@microsoft.com