BOSTON UNIVERSITY College of Engineering

# Aerospace Proposal Approval Form

***Note***: Proposal must be submitted prior to experience.

**Students**: Please e-mail the completed form to engrec@bu.edu for review, along with your written proposal. General questions regarding the Experiential Component should be directed to engrec@bu.edu; all other questions should be directed to the concentration coordinator. The experiential component proposal must be submitted prior to the experience and no later than December 1 of a student's senior year.

Student Name:_____ BU ID#:_____

Major:_____ Email Address:_____

Advisor:_____ Class Year: _____

I plan to complete the experiential component requirement for the Aerospace Concentration by:

☐ Research Experience in Lab

☐ Internship in Aerospace field Location (State): _____ ☐ In-Person ☐ Remote

☐ Senior Design Project

☐ Other:_____

Required Supporting Documentation:

☐ Attached Copy of Experiential Component Proposal

☐ I acknowledge that for all group projects, individually written reports must be submitted to be used for the Experiential Component.

Name of Supervisor: _____

☐ I acknowledge that upon completion of the proposed experiential component, I will need to submit a written summary of my experience. The completed report must be submitted to engrec@bu.edu by the last day of classes of the Spring term, Senior Year.

Student Signature : _____ Date: _____

☐ Approve
☐ Deny

Proposal Reviewed By: _____ Date: _____
Signature of Concentration Coordinator

Comments:

06/23/2026