



## Concentration in Robotics Experiential Component Summary Approval Form

**Students:** Complete all fields outlined in blue and sign by typing into the appropriate field. Please e-mail the completed form to engrec@bu.edu for review, along with your written summary. General questions regarding the Experiential Component should be directed to engrec@bu.edu; The experiential component summary must be submitted no later than last day of Spring semester classes, senior year.

Student Name: \_\_\_\_\_ BU ID# \_\_\_\_\_

Major: \_\_\_\_\_ Email Address: \_\_\_\_\_

Advisor: \_\_\_\_\_ Class Year: \_\_\_\_\_

I **have completed** the experiential component requirement for the Robotics Concentration by:

Research Experience in Lab

Internship in the Robotics Sector

Senior Design Project *\*Please note all group projects require an individual written summary*

Directed Study in Robotics

Other: \_\_\_\_\_

Required Supporting Documentation:

Attached Copy of Experiential Component Summary (1 page, Signed by Supervisor; **Required**)

Name of Supervisor: \_\_\_\_\_

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

*Office Use Only*

### EXPERIENTIAL COMPONENT SUMMARY APPROVAL

Summary/Evaluation received in Undergraduate Records Office on \_\_\_\_\_ by \_\_\_\_\_

Approve  
Deny

Proposal Reviewed By : \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Concentration Coordinator

Comments: