Senior Design Purchase Request 2024-2025

Team	ID
Advisor Na	me
Advisor En	nail
Vend	dor
Total Approximate C	ost
Bill of Materials File Na (If shopping cart can be linked via URL, it be pasted in this field inste	can
Justification for Purchase:	
Project Advisor Certification	
I, the undersigned Project Advisor for this project, hereby certify that this request is aligned with the needs of the project and is in compliance with the guidelines and requirements set forth by Senior Design, including those contained in the Safety Assessment Form.	
Name (Print):	
Project Advisor Signature:	
Date of Signature:	