

Department of Biomedical Engineering  
 BM-413 Final Year Design Project  
**Attendance of Final Year Project Group**  
 (To be maintained by the Supervisor/Co-Supervisor)



F/SOP/FYDP 02/05/00

For Fall Semester

For Spring Semester

Name (Supervisor/Co-Supervisor): \_\_\_\_\_

Title of Project: \_\_\_\_\_

Seat No.	Name of Students	Meetings	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Meetings Attended	% Attended
		Date																		

\_\_\_\_\_  
 Signature with Date  
 Supervisor

\_\_\_\_\_  
 Signature with Date  
 FYDP Coordinator