Project Withdrawal Request – EECE 597

**{Please forward to MEng Program Advisor to register project}**

**Student:** **Student Number:**

**Supervisor:**

**Industry Sponsor:** *{Same as Project Proposal}*

**Title:**

**Dates** *{Month and year only}*

**Start:** *Martober - 2025*

**Expected Completion:** *Decembruary - 2025*

**Notes**

*{Brief explanation of why the project is not being completed}*

**A grade of “W” will appear on the student transcript**

**Certification** *{Signature & Date – added to PDF file} yyyy / mm / dd*

**Student: Date:**

**Supervisor: Date:**

**Program Advisor: Date:**