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| C:\Users\Rondell\Desktop\EG newlogo v4 sq v2 1286x1286.png | Open Lab Authorization | http://engineering.nyu.edu/sites/polyproto.poly.edu/files/engineering_long_color.jpg |
|  |  |
| Last Name | First Name |
| Section | Experiment Number and Name |
| Regular Experiment Date (syllabus) |  |

**Reasons why lab was missed:**

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Faculty Member’s Name Faculty Member’s Signature

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Date issued Expiration Date **(one week from today)**

**Student Statement:**

I understand that it is **my responsibility** **to complete** the laboratory **experiment** **within one (1) week** of obtaining this authorization and **turn in the** **report** no later than **one (1) week thereafter**. Any late submission beyond that deadline will be discarded and not graded.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Student’s Signature

**TA acknowledgement:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TA accepting form **(please print name)** TA’s Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **PLEASE VERIFY EXPIRATION DATE!** Date of attendance