## **Electrical Engineering Department**

## **Capstone Project Meeting Form**

Program: L'nepheening / Toleran



| Project Title:   |  |               |                                 |            |                                   | Project Group No:                                |   |
|--|--|---------------|---------------------------------|------------|-----------------------------------|--|---|
|  | 1- Nactive Al-Jack                             | ID            | 60105890                        |            |                                   | Meeting Day/Date:                                |   |
| Student Names:   | 2- Islam Azzam                                 | ID            |                                 |            | Thursday March 6th, 2025 Week No: |  |   |
|  | 3-   | ID            | Octob 1 to                      |            | 700-4300                          | Week No:   |   |
|  | 4- —   | ID            |                                 |            |                                   | Task Completion %                                |   |
| <u> </u>   |  |               | dent Res                        | sponsik    | ole for                           |  |   |
| Tasks to be Done this week: (Please write detailed and specific tasks from the project plan with due date) |  |               | the Task (One student per task) |            |                                   | 1 1  | or evaluation of accomplishment of tasks to each team member in previous week.) |
| 1  | presentation properetion                       |               | (one stade                      | Per tus    |                                   | AN +   | asks completed 600%   |
| 2  | Into makon recesp.                             |               |                                 |            |                                   |  |   |
| 3  | ppt stides                                     |               |                                 |            |                                   |  |   |
| 4  |  |               |                                 |            |                                   |  |   |
| 5  |  |               |                                 |            |                                   |  |   |
| 6  |  |               |                                 |            |                                   |  |   |
| 7  |  |               |                                 |            |                                   |  |   |
| 8  |  |               |                                 |            |                                   |  | /   |
| 9  |  |               |                                 |            |                                   | /  | ,   |
| 10   |  |               |                                 |            |                                   |  |   |
| Meeting Minutes:   | 25   |               |                                 |            |                                   |  |   |
| Following part has to b<br>Supervisor Comment  | e filled and signed by the project supervisor: |               |                                 |            |                                   |  |   |
| Attendance<br>Present(P)/Absent(A)   | Supervisor Evaluation of Individual Student:   | No Acheivment | Needs Improvement               | Acceptable | Poog                              | Excellent  | Comments  |
|  | Student 1: 💡                                   |               |                                 |            |                                   | 1  |   |
|  |  |               | -                               | +          | +                                 | <del>                                     </del> |   |
|  | •  |               |                                 |            | 1                                 | /  |   |
|  | Student 3:                                     |               |                                 |            | -                                 | <del>                                     </del> |   |
|  | Student 4:                                     |               |                                 |            |                                   |  |   |
|  |  |               |                                 |            |                                   |  |   |
| Supervisor Name:   | Hassan Mahrasnah J                             | Date          |                                 |            |                                   |  |   |
| Signature:   | ( Carro )                                      | Date          | •                               |            |                                   |  |   |