

MEETING RECORD *RF-MP-MR/2018***PROGRAM NAME & COURSE CODE:** _____**SEM:** /**SESSION:****Student Name :** _____**Student ID :** _____**Project Title :** _____

_____**Supervisor/s :** (i) _____ (ii) _____

DATE	SUMMARY OF DISCUSSION	SUPERVISOR'S SIGNATURE

Note: Must be submitted at the end of the semester together with the Project Report.