

TEAM UP-DATE

Current Number of Team Participants: _____

Team Members Names and Classification:

Team Captain: _____ Phone no.: _____

E-mail: _____

Name of Class(es) Affiliated with Project:

Total Number of students in class: _____ Total Number of student on
team: _____

Classification/Breakdown of students: (Number of Sophomores, Juniors, and Seniors on team):

Sophomore: _____ Junior: _____ Senior:

Faculty Project Advisor's Signature

Printed

School

Date