

## MECH307 Student Information Survey

Name (last, first): \_\_\_\_\_

Lab Section Number, Day, and Time (e.g., L01, T, 8 am): \_\_\_\_\_

People **in your Lab Section** who you would like to have as group members  
(2 or 3 others; blank if no preference):

\_\_\_\_\_

Cumulative GPA: \_\_\_\_\_      Engineering GPA: \_\_\_\_\_

**Preferred group working time:**

weekday mornings	weekday afternoons	weekday evenings	weekends
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**Electronics experience** (building circuits, repairing electronics, using instrumentation, etc.):

none	some	extensive
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**Crafting experience** (woodworking, model building, etc.):

none	some	extensive
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**Computer ability** (programming, application proficiency, Internet skill):

poor	average	excellent
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**Machine shop experience** (using mills, lathes, drill presses, etc.):

none	some	extensive
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**Non school-work job commitment** (hours per week):

none	1-9 hr	10-19 hr	20-29 hr	30 or more hr
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**If you bought a new textbook, would you like Dr. Dave's share of the profit donated to the ME Department?**

yes	no	no preference	I bought a used book
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