



Title of Senior Design Project

Advisor Meeting Agenda and Minutes

Team No.: _____

Date : _____

Student Name	Student ID	Signatures

Meeting Agenda			
No.	Topics to be discussed	Presenter	Time (min)
1			
2			
3			
4			

Key Points Discussed and Decisions		
No.	Topics discussed	Decisions
1		
2		
3		
4		

Key Points Discussed and Action Items				
No.	Topics discussed	Action Item(s)	Assigned to	Due Date
1				
2				
3				
4				