# HPMI – 3D Printing Request Form

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| --- |
| Name & Information |
| **Name** |  |
| **Email** |  |
| **Phone** |  |
| **Department** |  |
| **HPMI Advisor** |  |
| **Date of Request:** | **Preferred Date of Completion:** |
| Part Requested Information |
|  |
| File Name |  |
| File Size |  |
| Requested Part Size (LxWxH in mm) |  |
| Is this a static or working part? | Static [ ]  | Working [ ]  |
| Please provide a brief description of the part and its function bellow |
|  |

**Note:** Ensure that the requested file is up to the desired specifications and in .stl format. We do **NOT** check to ensure that files are properly designed. What is on the file is what will get printed.

[ ]  I ensure that I have read the disclaimer above and any errors on the drawing will be my responsibility.

 

(Researcher Name) (Researcher Signature)



(HPMI Advisor Name) (HPMI Advisor Signature)