



Project Name: _____

Project Location: _____

Owner Representative: _____

Student Name: _____

The undersigned agrees that the student named above has permission to use our building for educational purposes as a model in the Department of Architectural Engineering's Senior Thesis Program.

Owner Representative Signature

Date

Please return this signed form via mail or fax to:

*M. Kevin Parfitt, Associate Professor
Department of Architectural Engineering
The Pennsylvania State University
104 Engineering Unit A
University Park, PA 16802*

*Fax: 814-863-4789
Attn: M. Kevin Parfitt*

**For more information about the Senior Thesis Program, please visit our e-Studio website at
<http://www.engr.psu.edu/ae/thesis>**