Mechanical & Aerospace Engineering
Laser Cutter Request Form

Name: ________________________________________________________________

Research Group / Class: _______________________________________________

Email: _______________________________________________________________________

Overall dimensions, thickness, material:

Date Part(s) Submitted: _________________________________________________

Date Part(s) Requested: _________________________________________________
(Minimum 5 business days from date of submission)

Advisor Approval / Signature: ____________________________________________

Submittal Instructions
Submit the following files via email to: MAELaserCutter@gmail.com
• Cut file with material border
• This form, filled out & signed

A TA will be in contact with you to discuss the part, whether or not it will be
approved, and part file conformity. For questions regarding this form or required
file types, please stop by HB110 or send an email to the above address.

Part File Conformity
• Maximum overall dimensions: 18 X 32 in
• Maximum material thickness: 0.25 in
• File type: .DWG or .DXF
• Line width: 0.00inch (mm)
• Line color (RGB color scale):
  o Red (255,0,0) - Cutting
  o Blue (0,0,255) - Engraving (vector)
  o Black (0,0,0) - Engraving (raster)