

Mechanical & Aerospace Engineering **Laser Cutter Request Form**

Name: _____

Research Group / Class: _____

Email: _____

Do you need laser cutter training? Yes _____ No _____

Overall dimensions, thickness, description of material:

Date Part(s) Submitted: _____

Date Part(s) Requested: _____

(Minimum 5 business days from date of submission)

Advisor Approval / Signature: _____

Submittal Instructions

Please submit all of your files via email to the following: maelaser@gmail.com

- Cut file with material border
- This form, filled out & signed
- PDF version of part with dimensions

A staff member or 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, please stop by Lab 1228 or send an email to the above address

Part File/ Material Conformity

- Maximum overall dimensions: **18 X 32 in**
- Maximum material thickness: **0.250 in**
- File type: **.dwg** or **.dxf**
- Line width: **0.00inch (mm)**
- Line color (RGB color scale):
 - Red (255,0,0) - Cutting
 - Blue (0,0,255) - Engraving (vector)
 - Black (0,0,0) - Engraving (raster)