**Autonomous System Responsible Form**

**University: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Car/Team No:\_\_\_\_\_\_\_**

**Contact E-Mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Autonomous System Responsible Information**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enter Relevant Experience / Qualifications / Training

**Faculty Advisor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Team Leader Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Instructions: 1. Add Team name, Car number, Contact e-mail address, ASR name; 2. Delete text highlighted in yellow and replace with your text - expand the text boxes if necessary; 3. Team leader and faculty advisor to sign the form; 4. Submit by due date as documented in ‘Key Dates’**