## **QUESTIONS TO HAND IN – EXPERIMENT 11**

NAME				
LAB INSTRUCTOR	LAB DAY/TIME			

1. Complete the table below for the collision types specified.

<b>Collision Type</b>	<b>m</b> <sub>1</sub> (kg)	<b>m</b> <sub>1</sub> (kg)	<b>v</b> <sub>1</sub> (m/s)	<b>v</b> <sub>2</sub> (m/s)	<b>v</b> <sub>f1</sub> (m/s)	<b>v</b> <sub>f2</sub> (m/s)
Completely Inelastic	1	1	2	0		
Elastic	1	1	2	0		