



STUDY GROUP CONTACT INFORMATION

Group Coordinator: _____

Meeting Time(s): _____

Group Members:

Name	Phone	E-mail
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Group Responsibilities:

Name	Responsibility(s)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____