Group Name: System No: Leader: **Number of Participants** This is the ___ group meeting Location **Date** DD Day of the YY MM Expected Attendance: ____ Mentor: Week Facilitator: Actual Attendance: _____ Absentees: Completed by: Study Materials Used Progress / Content President / Convener's Assessment of the Meeting: Active Discussion List of Attending Smooth Progress Members Satisfactory Needs Improvement

Appendix II "YZU Theme-based Study Group" Progress Report Form

Application Date:YYYY-MM-DD

Organizer: Teaching Excellence Center, YZU Sponsor: Higher Education Sprout Project, MOE