Study Group Contract

Course: _____

Group Members:

Name	Signature	Email	Cell Phone

Get Organized

Why are you forming this study group?

_____

_____

_____

When will you meet (day and time)? _____

Where will you meet? _____

How will you remind each other of your meeting? ___ E-mail ___ Phone/Text

What responsibilities will you assign each group member?

Name	Responsibility

Remember to:

1. Set goal(s) for each session using the Session Report on the back of the contract.
2. Discuss openly and respectfully; listen to each other.
3. Reflect on how you met your goal(s) for the study group session.
4. Set responsibilities for each group member.
5. Assign a rotating group leader, who will remind members of the session meeting time and location.
6. Set your next meeting day and time.

Study Group Session Report

Course: _____ Date & Time of Session: _____ Location: _____

Sign-In	Name	Responsibility

Study Session Goal: _____

Study Session Reflection:

- What content did you cover in this session?

- Describe the group interaction. Give examples of positive interaction and ways you can improve.

- Do you feel that you gained a better understanding of the material from participating in this study group session? Why or why not?

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