

**Group Name:** \_\_\_\_\_

**Group Members:** (If more space needed attach another piece of paper)

*Member #1*

Name: \_\_\_\_\_ Leader: \_\_\_\_\_(Y/N)  
Last Name, First Name M.I.

Assignment #4 - Divided workload:

Duty title Partner/Meeting time if applicable  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

*Member #2*

Name: \_\_\_\_\_ Leader: \_\_\_\_\_(Y/N)  
Last Name, First Name M.I.

Assignment #4 - Divided workload:

Duty title Partner/Meeting time if applicable  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

*Member #3*

Name: \_\_\_\_\_ Leader: \_\_\_\_\_(Y/N)  
Last Name, First Name M.I.

Assignment #4 - Divided workload:

Duty title Partner/Meeting time if applicable  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

*Member #4*

Name: \_\_\_\_\_ Leader: \_\_\_\_\_(Y/N)  
Last Name, First Name M.I.

Assignment #4 - Divided workload:

Duty title Partner/Meeting time if applicable  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

*Member #5*

Name: \_\_\_\_\_ Leader: \_\_\_\_\_(Y/N)  
Last Name, First Name M.I.

Assignment #4 - Divided workload:

Duty title Partner/Meeting time if applicable  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

## Schedule of Group Meetings

### Advice:

1. Have an entire group meeting at least twice a week outside of the discussion section on Friday.
2. Work with one other person if possible.
3. Communicate frequently. (Be social with the group.)
4. Always come to second part of discussion section.
5. Keep an comprehensive notebook and start early.

### Questions to ask the Group:

1. What dates and times would be the best time to have two or more meetings for the whole group?

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

\*Please submit to TA at least one time slot which every member of the group can have a meeting.

2. What do you plan to finish by next discussion section?

\* There will be preview of your work next week. (Please Sign-up)

	Duty	Person Responsible
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____

3. What seems to be the main problems that are keeping you from finishing your work?

\* We will try to get the license problems resolved as soon as possible.

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4. Any comments?

\* Any **POSITIVE** or negative comments are welcome!!

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<b>Duty title</b>	<b>Partner/Meeting time if applicable</b>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

**Meeting Time and Place**

Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____

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<b>Duty title</b>	<b>Partner/Meeting time if applicable</b>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

**Meeting Time and Place**

Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____

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<b>Duty title</b>	<b>Partner/Meeting time if applicable</b>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

**Meeting Time and Place**

Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____

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<b>Duty title</b>	<b>Partner/Meeting time if applicable</b>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

**Meeting Time and Place**

Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____
Date: _____	Time: _____	Place: _____