GROUP PROCESS NOTES

Facilitator: _____
Group: _____
Location: _____
Date: ___/___/_____ **Time:** ___:___ **a.m./p.m.**

Notes:
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

1. Did you accomplish all lesson objectives?
   Yes___ No___

   - Objectives omitted:
     - _____
     - _____
     - _____
     - _____

   - Obstacles/reasons for omitted objectives:

   _____
   _____

2. Which planned curriculum activities did you use in this session?
   - _____
   - _____
   - _____
   - _____

3. Which additional activities did you use in this session?
   - _____
   - _____

4. Did students raise unplanned issues (issues off today's lesson topic)?
   Yes___ No___

   - Issues raised:
     - _____
     - _____

   - How were issues discussed/processed in the group?

   _____
   _____
   _____

5. Which activities/topics did the participants like best?
   - _____
   - _____
   - _____

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