

<i>For Office Use Only</i>	
Date received	Date Reviewed

**STUDY GROUP FORM  
CATEGORY 1 ONLY**

**Please Print and use the back of the page if necessary for completing questions**

**Each member of your group will complete this form.**

**STUDY GROUP** (minimum two RAC members)

Total hours \_\_\_\_\_ Total hours divided by 2 \_\_\_\_\_ = Total credits

Where was the activity conducted? \_\_\_\_\_

Date of activity: \_\_\_\_\_

Who was the group? (minimum two members)

Member #'s

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

5. \_\_\_\_\_

\_\_\_\_\_

What was the focus? \_\_\_\_\_

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How was the activity structured? \_\_\_\_\_

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What study aids and/or reference material was used? \_\_\_\_\_

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Please comment on how you might improve on the structure or outcome of this activity in the future.

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**Please submit this form with the CEU activity log sheet**

