DEREE-The American College of Greece STUDENT ACADEMIC SERVICES

CONFERENCE REPORT

	`irst Name:			1.2. Student ID # :
2. Learning Facilitator				
2.1. LF Last Name, First Name:		2.2. Please check one: Instructor LF Peer LF		
3. Conference Details	2.0 Start Min		2.2 D	(m-i-)
3.1. Date (dd/mm):	3.2. Start Tin	ie:	3.3. Durati	on (min):
3.4. Service (check one):	3.5. Location (please check one): Room 1 Outside Tables Room 2 Floating			
DWC DPT	Room 2 Floating Room 3		rioating	
4. Assignment Details				
Course / Instructor:		Other:		
Project / Topic / Other:				
5.1. What were the studen	c 5 concerns			tion any relevant
(Please indicate briefly):	e s concerns	fee		idelines the instructor
		5.4. the	what was the conference Discussion of conganization of	the primary focus of ? oncepts thought/ideas mmar, syntax, diction, etc.)