



# LEARNING TEAM CHARTER

Course Title \_\_\_\_\_  
Instructor \_\_\_\_\_  
Course Dates \_\_\_\_\_

All team members participated in the creation of this charter and agree with its contents ☐ (Please check)

## Team Members/Personal Information

Name	Phone	Fax	Email
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Team Member Skill Inventory

(Areas individual members can contribute/want to develop)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Learning Team Goals

(May include project assignment goals, group process goals, quality level goals, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are potential barriers to the achievement of these goals?

\_\_\_\_\_  
\_\_\_\_\_

## Ground Rules

Meeting schedule, locations, attendance expectations, agenda, assignment completion, communication methods, etc.

\_\_\_\_\_  
\_\_\_\_\_

## Conflict Management

What are potential conflicts that might arise among or between team members during this course? How will team members deal with these and other conflicts?

\_\_\_\_\_  
\_\_\_\_\_

## Faculty Member Feedback to Students

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_