

## Cooperative Learning Activity Report

Date: \_\_\_\_\_ Title of Lab Activity: \_\_\_\_\_

Group Members (Your *signature* indicates your involvement and understanding of the report to which this form is attached. Do not sign it for someone else.)

(Note: In groups of three, the roles of materials manager and resource person are combined.)

Coordinator: \_\_\_\_\_

Recorder: \_\_\_\_\_

Materials Manager: \_\_\_\_\_

Resource Person: \_\_\_\_\_

Did each member of the group contribute to the discussion? \_\_\_\_\_

Did each member of the group participate in the activities? \_\_\_\_\_

Did each member fulfill his/her responsibility? \_\_\_\_\_

Did your group complete all assigned activities? \_\_\_\_\_

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1. What mathematical concept was addressed by this activity?
  2. Address the strengths and weaknesses of this activity. Use the back of this sheet if necessary.
  3. What could have been done to make your group interaction more effective?