

ASPIRE: Cohort 1



Session: _____

Instructor: _____

Location: _____

Group Size: _____

Item	Completed	Notes:
Room Reserved		
Confirm faculty speaker (check pre-reads, handouts)		
Reminder email sent to students (day, time, place, pre-reads, handouts)		
Lunch/snack ordered (note food allergies)		
Handouts in room		
Evaluation forms in room		
Evaluation form collection (not faculty member if evals are anonymous)		
Equipment needs (such as video camera, tripod)		
Other		