Name:	Period:
Study Group Feedback For	<u>rm</u>
My current study group members:	
☐ I am satisfied with my current group and want to leav	e it just the way it is.
☐ I would like to change my study group. (Give suggesting)	ons, if possible)
Two or three people I would like to work with:	
One person I would prefer not to work with (optional):	
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email: larrygeni@gmail.com