

PLC Team Meeting Form

Date: _____ Location: _____ Time: _____

Topic: _____ Meeting's Facilitator: _____

Summary of Discussion and Activities:

Classroom applications since last meeting – what has been tried:

Signatures of Members Present:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Member(s) Absent:

Next meeting:

Date: _____ Location: _____ Time: _____

Topic: _____ Meeting's Facilitator: _____

What needs to be done for the next meeting: