



Reporting Form for GEA Member Contact

Please bring this completed document to the next AR meeting.

Name: _____ Date: _____

School / Building: _____

Method of contacting members:

_____ 10-minute meeting

_____ Email

_____ Walking meeting (visiting teachers in classrooms)

_____ Video

_____ Memo

_____ Record & share 10-minute meeting

_____ Other (please describe): _____

• **No. of members contacted:** _____

• **No. of potential members contacted:** _____ **No. Joined:** _____

• **Concerns or questions raised:**