

Student Name \_\_\_\_\_

Student ID # \_\_\_\_\_

\_\_\_\_\_ Date

Start Date \_\_\_\_\_

End Date \_\_\_\_\_

Use this form to keep track of the Learning Objectives (LO) you have met. A minimum of 5 out of the 8 must be met for course completion. Keep adding to this form and submit at the end of each semester you are enrolled in CIDS680. See LearningHub course for deadline.

<b>Learning Objectives Achieved</b>			
<b>Objectives</b>	<b>Year/Semester Achieved</b>	<b>Agency/Organization Achieved At</b>	<b>Instructor Signature</b>