

GMCBC Christian Education Course Reporting Form

Address: 1414 Sora Street – Baton Rouge, LA 70807 – Reverend Clee Lowe, Pastor

Dr. Barbara Thomas-Parker, Christian Education Director

Attendee and Course Information

Attendee's Name: _____ Address _____

Date(s) Attended: _____ Date of Report: _____

Conference Name: _____

Class/Course Title: _____

Location (City, State): _____ Class Instructor: _____

Instructions

Please complete this form to report your attendance and learning outcomes for the Christian Education course. Be sure to provide accurate details for each section below so your participation can be properly recorded.

Summary of Class Content

Key Learning Concepts/Takeaways

Application of Knowledge

Additional Comments
