Reflection Sheet

Date: ____________

Student Name: ____________________________________________

Professor/Organization: ______________________________________

Please complete this reflection sheet IMMEDIATELY after your session.

1. What did you enjoy most about the experience you had today?

2. What did you least enjoy about your experience today?

3. Did the experience today teach you something new about yourself? If so, what?

4. If you are doing this again, is there something you expect to be different about yourself or the experience?

Please return completed sheet to the CCE office
Benedict Hall, Room 101; (915) 747-7969; cce@utep.edu; http://utep.edu/cce