

ANNUAL SEMINAR REPORT
Fall 20 ____ and Spring 20 ____

Name of Seminar: _____

Seminar Coordinator(s)	Contact Information

Participating Teaching Analysts	
Core Teaching Analysts	Visiting Teaching Analysts
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.

Candidate Names	Pre-Control	Control	Recent Graduate
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			

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Seminar Schedule	Days/Hours (For example: Saturdays 8:30 am – 4:30 pm; Sundays 8:00 am – 1:30 pm)
Didactic	
Case Colloquium	
Process Group	

Seminar Fees (cost to candidates <i>as applicable</i>)	
Application Fee	\$
Tuition Fee (Fall)	\$
Tuition Fee (Spring)	\$
Case Colloquium	\$
Interview	\$

Seminar Payments (payment to teachers, consultants)	
Didactic per hour	\$
Colloquium per hour	\$
Process Group per hour	\$
Interviews	\$

Notes or comments

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Case Colloquium					
Date	Supervising Analyst	In Person	Virtual	Hybrid	Hours

Group Process					
Date	Supervising Analyst	In person	Virtual	Hybrid	Hours

Notes or Comments