

SRL INFO FORM

Name & Grade:

Please fill out this form to give your input on how we should shape this program. We are looking for your interests and ideas to theme our final game!

Question 1. What are you interested in?



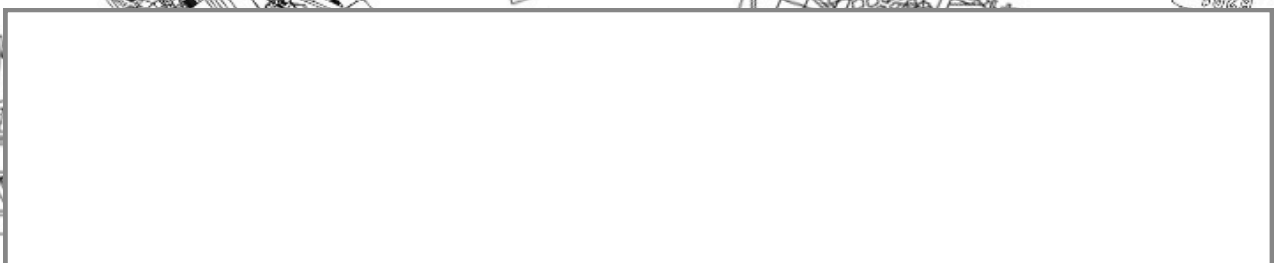
Question 2. What do you already know about robotics?



Question 3. What is a personal goal for you in this program?



Question 4. What would you like to learn about in robotics?



DESIGN A LOGO FOR YOUR TEAM:

