



Math 2303

In-Class Activity # _____

Student Name

Mark the box next to your class:

PSID#

<input type="checkbox"/>	Dr. Flagg, Section 25738, MWF 11 - noon
<input type="checkbox"/>	Dr. Tucker, Section 25734, TTh 8:30 - 10
<input type="checkbox"/>	Dr. Tucker, Section 25740, TTh, 11:30 - 1
<input type="checkbox"/>	Dr. Tucker, Section 25736, TTh, 2:30 - 4

Instructions:

- **Print out this form and bring it to class. You will need one of these activity forms each class day.**
 - **Complete the In-Class Activity on this page, following your professor's instructions.**
 - **In-Class Activities submitted on any form other than this one will not be graded**
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