**Center of Transformation**

***Final Project Group Member Worksheet***

CoT Facilitators must **submit this worksheet no later than April 15, 2024,** to: [CoT@bgcgw.org](mailto:CoT@bgcgw.org)

**Name of Club or Organization:**Insert here

**Group 1 Name** *(Select a group name for the competition):* Insert here

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Group Member Full Name** | **Age** | **Gender** | **Grade (2023-2024)** | **Race/Ethnicity** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |

**Group 2 Name** *(Select a group name for the competition):* Insert here

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Group Member Full Name** | **Age** | **Gender** | **Grade (2023-2024)** | **Race/Ethnicity** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |

**Group 3 Name** *(Select a group name for the competition):* Insert here

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Group Member Full Name** | **Age** | **Gender** | **Grade (2023-2024)** | **Race/Ethnicity** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |

**Group 4 Name** *(Select a group name for the competition):* Insert here

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Group Member Full Name** | **Age** | **Gender** | **Grade (2023-2024)** | **Race/Ethnicity** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |