

KINGSBOROUGH COMMUNITY COLLEGE  
of  
The City University of New York  
POST-OBSERVATION CONFERENCE MEMORANDUM  
Spring

Signed by Chairperson

Faculty Member's Name \_\_\_\_\_

Date of Discussion \_\_\_\_\_ Department \_\_\_\_\_

(attach additional pages, if necessary)

Signed \_\_\_\_\_

Title \_\_\_\_\_

(Observer, Chairperson or Chairperson's designee)

I understand that my signature means only that I have read this memorandum and that I may attach any comments I wish.

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Joanne Russell  
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