

CAS: Activity/Project Self- Evaluation Form
(You need to fill one out for each new activity)

Candidate Name: _____

Graduation Year: _____

School Code

Indicate the area(s) that the activity/ project encompassed:
(circle appropriate; they can overlap)

Creativity

Action

Service

Number of Hours (approximately): _____

Name or description of activity/ project:

Date(s) of activity/project: _____

Briefly describe your initial goals for this activity/ project. Include specific CAS learning outcomes that you intended to develop. (1. Increased awareness of your own strength and area for growth, 2. undertook new challenges, 3. planned and initiated activities, 4. worked collaboratively with others, 5. showed perseverance and commitment in your activities, 6. engaged with issues of global importance, 7. considered the ethical implications of your actions, 8. developed new skills)

Indicate how you will document your reflection(s) for this activity/project (i.e. Video log, Weblog, journal, scrapbook, interview, etc.):

Candidate's Signature: _____

To be completed by activity/ supervisor:

Was the student punctual: yes no

Did the student attend: yes no

Did the student show effort and commitment:
 yes no

Further comments (if any):

The activity/ project was (check one):

Satisfactory complete Not satisfactory complete

Activity/ project supervisor name: _____

Activity/ project supervisor signature: _____

Contact number: _____

Date: _____

Creativity, Action, Service Statement of Goals

“Creative minds have always been known to survive any kind of bad training.”
~Anna Freud

Candidate's name: _____ Diploma Year: _____ Date: _____

What goals have you set for your own personal growth that fulfill the requirements of CAS and which you can accomplish within the next two years?

1. _____

2. _____

3. _____

4. _____

5. _____

What activities do you participate in right now that will help you to reach those goals?

1. _____
2. _____
3. _____
4. _____
5. _____

What new personal growth opportunities will you explore as part of CAS?

1. _____
2. _____
3. _____
4. _____
5. _____

CAS Activity/Project Proposal Form

This form should be completed for each project, and be submitted to the CAS coordinator for approval.

Candidate Name: _____ Candidate Number: _____

Project Title: _____

CAS Elements: Creativity _____ Action _____ Service _____

I. Introduction: Write a brief description of the project. Explain it's characteristics and context. Consider the guiding questions on page () of your CAS book when answering.

II. Organization:

1. Diagnosis: What identified needs are you addressing, for yourself and others?

2. Planning: What are your objectives? What activities do you have planned?
What is the length of the project? What is the frequency of the activities?

3. Supervising Adult(s): Name and Position

III. Coordinator Approval:



International Baccalaureate Form CAS/AEF

CAS: activity/project self-evaluation form

SUBMIT TO: **ACTIVITY/PROJECT LEADER** SESSION: **SESSION**.....

SCHOOL NUMBER:

SCHOOL NAME: **SCHOOL NAME**.....

- *The following questions should be addressed at the end of each activity/project. These are guiding questions. Candidates can either answer on this form or write a reflective, continuous text incorporating responses to these questions. Type the information or write legibly using black ink.*

CANDIDATE SELF-EVALUATION

CANDIDATE NAME: **NAME**.....

CANDIDATE SESSION NUMBER:

NAME OF ACTIVITY/PROJECT: **[PROJECT]**..... NO OF HOURS (APPROX):

1. Summarise what you did in this activity/project and how you interacted with others.

[Text].....
.....
.....

2. Explain what you hoped to accomplish through this activity/project.

[Text].....
.....
.....

3. How successful were you in achieving your goals? What difficulties did you encounter and how did you overcome them?

[Text].....
.....
.....

4. What did you learn about yourself and others through this activity/project? What abilities, attitudes and values have you developed?

[Text].....
.....
.....

SCHOOL NAME:

5. Did anyone help you to think about your learning during this activity/project? If so, who helped and how did they help?

.....
.....
.....

6. How did this activity/project benefit others?

.....
.....
.....

7. What might you do differently next time to improve?

.....
.....
.....

8. How can you apply what you have learned in other life situations?

.....
.....
.....

Candidate's signature: Date:.....

To be completed by the activity/project leader

Punctuality and attendance:

Effort and commitment:

Further comments:

.....

The activity/project was (circle the desired response):

Satisfactorily completed Not satisfactorily completed

Activity/project leader's name:

Activity/project leader's signature: Date:.....

Please give this form to the CAS coordinator when it has been completed.

