CAS LOG

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Hours			/			
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C						
Name & Phone # or e- mail of Sumervisor						
Nan	-	 	-			
Description of Activity						
Date						

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

Candidate Name: Graduation Year: Indicate the area(s) that the activity/ project encompassed: (circle appropriate; they can overlap) Creativity Action Service Number of Hours (approximately):						
Graduation Year:_		School (Code			
		encompassed:				
	Creativity	Action	Service			
Number of Hours ((approximately):					
Name or description	on of activity/ project:					
Date(s) of activity/	project:					
intended to develop challenges, 3. plant and commitment in	o. (1. Increased awareness ned and initiated activities	of your own strength and a , 4. worked collaboratively d with issues of global imp	fic CAS learning outcomes that rea for growth, 2. undertook new with others, 5. showed perseve ortance, 7. considered the ethic	ew erance		
Indicate how you v scrapbook, intervie		on(s) for this activity/proje	ct (i.e. Video log, Weblog, jour	nal,		
Candidate's Signat	nre:					

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 (ch	neck 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." $\sim\!\!$ Anna Freud

Candidate's name:	Diploma Year: Date:
What goals have you set for your CAS and which you can accompl	own personal growth that fulfill the requirements of ish within the next two years?
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•	
What activities do you participate	in right now that will help you to reach those goals?
•	
•	
What new personal growth oppor	tunities will you explore as part of CAS?
·	
•	
•	
•	

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?

III. Coordinator Approval:

3. Supervising Adult(s): Name and Position

CAS REFLECTION FORM

(Please put this inside your binder behind your "Self Evaluation Form" and fill one of these out for each new activity)

"Big ideas rarely happen overnight. They usually evolve from curious minds willing to take risks."

Name :	Date of CAS
Activity Completed	Hours completed
Which category does this fall under: CR	EATIVITY, ACTION, SERVICE
are a list of sample topics to address: Ho learn, how did this project make you feel	ou learned by doing this service project? Here w did you feel about the project, what did you l, if you could start over, what would you do ay? Please feel free to reflect on other areas as



International Baccalaureate Form CAS/AEF

CAS: activity/project self-evaluation form

SUBMIT TO:	ACTIVITY/	PROJECT LEADER	SESSION: SESSION
SCHOOL NUMBE	R:		
SCHOOL NAME:	SCHOOL NA	AME	
questions. Cana	lidates can eit	her answer on this form	of each activity/project. These are guiding or write a reflective, continuous textration or write legibly using black ink.
CANDIDATE SEI	LF-EVALUAT	ION	
CANDIDATE NAM	ME: NAME		
CANDIDATE SESS	SION NUMBE	R:	
NAME OF ACTIV	TY/PROJECT:	[PROJECT]	NO OF HOURS (APPROX):
1. Summarise what	you did in this	activity/project and how y	ou interacted with others.
[Text]			
2. Explain what you	hoped to accor	mplish through this activit	y/project.
[Text]			
			<u></u>
3. How successful v you overcome them		eving your goals? What di	ifficulties did you encounter and how did
[Text]			
4. What did you lear and values have you	•	elf and others through this	activity/project? What abilities, attitudes
[Text]			

5. Did anyone help you to think about your learning durin and how did they help?	g this activity/project? If so, who helpe
	A STATE OF S
	Andrew (1994) in the Andrew (1994) in the grown position, the second of the Andrew (1994) in the Andrew (1994)
6. How did this activity/project benefit others?	
7. What might you do differently next time to improve?	
7. What finght you do directintly next time to improve	
8. How can you apply what you have learned in other life situ	
	And Park Control of the Control of t
Candidate's signature:	Date:
To be completed by the activity/project leader	
Punctuality and attendance:	
Effort and commitment:	
Further comments:	
NA PARA MARINESTELLA TERRETARIA DEL CONTRETARIA DE CARRESTA DE CARRESTA DE CONTRETARIA DE C	
The activity/project was (circle the desired response): Satisfactorily completed	Not satisfactorily completed
The activity/project was (circle the desired response): Satisfactorily completed	
The activity/project was (circle the desired response):	
The activity/project was (circle the desired response): Satisfactorily completed Activity/project leader's name:	
The activity/project was (circle the desired response): Satisfactorily completed Activity/project leader's name: Activity/project leader's signature:	



Supervisor's Signature:

IB CAS Log Sheet

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-d & Y	

Dates	# of Hours	Summary	Initials of Superviso
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IB CAS Summary Form

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Directions:	Write a clear experience.	,	e critical reflection			experience. the CAS Har				
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Candidate's	Signature:				_ 		Date:			
Parent's Sigr	nature:	 			·		Date:_			
CAS Coordir	nator's Signati	ıre	·				Date:			