IB CAS - Supervisor Evaluation Form

Creativity - Activity - Service

Student name:				Class of:*
CAS Component(s) * please c	ircle: Creat	ivity Activi	ty Servic	re
Name of Activity*:				
Date(s) of experience/ activit	y*			
CAS Advisor (Mission teacher) *			
STUDENT (please provide a d	escription of v	rnat you did an	a explain whici	h learning outcomes you met)*:
SUPERVISOR **(please check	the box which	a most closoly d	occribes the st	tudent's performance):
(please clieck	tile box willci	Tillost closely c	lescribes trie st	tudent's periormance).
	Excellent	Good	Satisfact	tory Unsatisfactory
Attendance				
Punctuality				
Initiative				
Effort/Commitment				
Attitude				
Personal Growth				
SUPERVISOR **(please check	k the learning	outcomes that		
Identify own strengths and develop areas for growth				ACHIEVED
Undertaken new challenges				
Planned and initiated an activity				
Worked collaboratively with others				
Shown perseverance and commitment				
Engaged in issues of global importance				
Considered ethical implications of your actions				
	ctorily comple	ted or	unsatisfactori	ly completed (circle one)
SUPERVISOR CONTACT INFO	ORMATION **			
Name and business/organizate	tion:			
Job Title:				
Telephone number:				
Email: Signature				
*Student will fill out all information. (and stamp if possible):				