CAS ACTIVITY SELF-EVALUATION (FORM CAS/AEF)

SCHOOL CODE: 0686 SCHOOL NAME: Longview High School	
SESSION: May, 20	
(This form MUST be attached to Activity Supervisor's Evaluation Report BEFO l completes his/her form).	RE the supervisor
CANDIDATE NAME: Candidate	#:
NAME OF PROJECT:	
**NO. OF HOURS: **Candidates must complete a copy of this form at the end of each activity. Type is write legibly using black ink. DIRECTIONS: Within two weeks of the completion of an activity, y form to the CAS Coordinator. The reflection should be in essay form of 150 words in length. Make sure to attach this page to any typed reshould explore your experience. Consider the following questions: *What CAS did your activity provide? *What did you observe? *Do you feel you made a difference? *Did anything surprise you? *What obstacles did you encounter? How did you overcome them? *What did you learn about yourself? *How does your CAS connect to broader social issues? *What did you learn about the people who worked with you on this provided.	you must submit this nat with a minimum eflection. Your essay
(You may use the available space on the front and back of this sheet for your refle	ction.)

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Candidate Signature:	
D /	-
Date:	