**Ridgeway High School CAS Form**

**Candidate Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Graduation Year**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name or description of experience/project**:

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| --- |
|  |

**Date range of experience/project**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Is this your long-term, group CAS Project?** YES NO

**Indicate the area(s) that the experience /project will encompass**: (circle all that apply)

CREATIVITY ACTIVITY SERVICE

**Check one or more of the specific CAS learning outcomes you plan to meet** **through this experience.**

1. \_\_\_\_\_Identify own strengths and develop areas for growth

2. \_\_\_\_\_Demonstrate that challenges have been undertaken, developing new skills in the process

3. \_\_\_\_\_Demonstrate how to initiate and plan a CAS experience

4. \_\_\_\_\_Show commitment to and perseverance in CAS experiences

5. \_\_\_\_\_Demonstrate the skills and recognize the benefits of working collaboratively

6. \_\_\_\_\_Demonstrate engagement with issues of global significance

7. \_\_\_\_\_Recognize and consider the ethics of choices and actions

**PREPARATION:** (add more pages as necessary)

* Briefly describe your initial goals for this experience/project.
* Clarify roles and responsibilities for yourself and others.
* Develop a plan of actions to be taken to accomplish this experience.
* Identify specified resources needed and timelines to accomplish this experience.
* Identify skills you may need to develop to engage in this CAS experience.

**CAS Coordinator signature for approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

All CAS experiences must be approved prior to starting the experience.

**ACTION: Document your dates throughout this experience in the table below.** Add additional pages if necessary.

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| Date | Activity Description | Supervisor Signature |
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**Supervisor Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did the student meet his or her goals defined above? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Candidate Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REFLECTION: Indicate how you will document your reflection(s) for this experience.**

\_\_\_\_\_ Journal \_\_\_\_\_ Video Log \_\_\_\_\_ Weblog \_\_\_\_\_Scrapbook \_\_\_\_\_ Other

**EVIDENCE: Attach documentation of evidence that you completed this experience.**

Evidence can include, but is not limited to, planning documents, letters, emails, certificates, acknowledgments of participation and achievements, photographs, videos and so on. Every CAS experience must have evidence attached.