



Student Name:

CAS Activity Leader's Evaluation Report

To Be Completed By The Activity/Project Leader

Thank you for your leadership of this activity. Please complete this form and return it to the student for inclusion in his/her CAS file.

Name of Activity:

Please comment on the student's attendance/punctuality.

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Did the student display good effort and commitment?

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Further Comments:

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Circle the appropriate choices.

The activity/project was: Creativity / Action / Service

The activity/project was: Satisfactorily completed / Not satisfactorily completed

State the number of hours spent on this activity:

Activity/project leader's full name:

Activity/project leader's e-mail address:

Activity/project leader's contact number/ school room number:

Activity/project leader's signature: Date:

Please hand the completed form to the CAS coordinator, Ms. Eleanor Nolan once you have finished an activity.
E-mail Address: enolan@eischools.ae