

CAS Proposal Form

Name: _____ Date: _____

Please check:

☐ Experience **Name/Title:** _____

☐ Project

Strand(s):

(check all that applies)

C ____ A ____ S ____

Log Required: _____

Name of Supervisor(s) _____

Title/Position: _____

Supervisor(s) email: _____

Site Address: _____

Telephone number: _____

Duration and frequency of CAS experience: _____

(ex. 2 hours/wk, all year; 3 hours on the weekend)

Start date: _____ End Date: _____

Description of Experience/Project:

Outline of duties, goals and connections to the IB learner profile:

Learning Outcomes:

Indicate which learning outcomes you plan on developing:

✓	Learning Outcome
	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.

Risk Assessment:

Consider the risks involved in this activity. Outline any health/safety concerns that may arise during this experience/project.

Student Signature: _____

Date: _____

CAS Advisor Approval of Proposal: _____

Date: _____