

CAS Project Form

Student project leader(s)	
Members 1. 2. 3. 4. 5. 6. 7.	
Role for each member 1. 2. 3. 4. 5. 6. 7.	1. <u>2.</u> <u>3.</u> <u>4.</u> <u>5.</u> <u>6.</u> <u>7.</u>
Title of project :	
Indicate (√) which strand(s) of the CAS Program are involved/materialized	Creativity: _____ — Activity: _____ — Service: _____ —
How we are following the CAS stages :	For each CAS stage, describe either what has been done or what you plan to do.
Investigation :	
Preparation:	
Action :	
Reflection:	

Demonstration :	
Name of organization the project is organized with or for, if applicable	
Contact person at organization, contact phone and email, if applicable	
Risk assessment required?	Yes/No
Student signatures: Indicate (✓) that you have been informed and agree with the above	<u>1.</u> <u>2.</u> <u>3.</u> <u>4.</u> <u>5.</u> <u>6.</u> <u>7.</u>
CAS supervisor/adviser signature	(v) Papathanasiou Natasa (v) Plaka Maria (v) Moutafi Xrysa
Date:	