

CAS: student final summary

Submit to: **CAS teacher** School deadline: Session:

School number:

0	0				
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School name:

- *Write legibly using black ink.*
- *This form is to be retained by the school. Do not send to the regional office unless requested.*

Candidate name: _____

Candidate session number:

0	0						
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Indicate below the CAS activities/projects in which you have been involved and the hours dedicated to each one with a total number of hours for the whole CAS course.

Number of CAS activities/projects which you have undertaken Total hours dedicated

Activities/projects	Approximate no of hours
1	<input style="width: 30px; height: 20px;" type="text"/>
2	<input style="width: 30px; height: 20px;" type="text"/>
3	<input style="width: 30px; height: 20px;" type="text"/>
4	<input style="width: 30px; height: 20px;" type="text"/>
5	<input style="width: 30px; height: 20px;" type="text"/>
6	<input style="width: 30px; height: 20px;" type="text"/>
7	<input style="width: 30px; height: 20px;" type="text"/>
8	<input style="width: 30px; height: 20px;" type="text"/>
9	<input style="width: 30px; height: 20px;" type="text"/>
10	<input style="width: 30px; height: 20px;" type="text"/>
11	<input style="width: 30px; height: 20px;" type="text"/>
12	<input style="width: 30px; height: 20px;" type="text"/>
13	<input style="width: 30px; height: 20px;" type="text"/>
14	<input style="width: 30px; height: 20px;" type="text"/>
15	<input style="width: 30px; height: 20px;" type="text"/>
16	<input style="width: 30px; height: 20px;" type="text"/>

