CAS activities

Name: Year: Advisory:

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| **Name of activity/project** | **Type** | | | **New**  **to you?** | **Length of activity** | | | **When**  **starting** | **Where taking place / who helping** | | | **Who with?** | |
| **C** | **A** | **S** | One-off | Short term | Long term |  | school | Local community | International  community | alone | With others |
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Approved CAS Coordinator / Advisor: