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| --- | --- | --- | --- |
| **SUBJECT:**  *(fill in the curricular subject of your activity)* | | | |
| **CONTEXT** | | **PUPILS** | |
|  | where ?  *(any information about where you did this activity)*  Distance: *Click here*  Place-relatedness: *Click here* |  | number  *(how many pupils in your activity ?)* |
|  | timing  *(how much time did you spend at this activity)* |  | age  *(age of pupils)* |
|  | planned ? *(Click here)* |  |  |

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| **AIMS** |
| **APPROACH** |
| **INVOLVEMENT SCORE:** *(if you scanned involvement, write the score here)* |
| **MATERIALS** |
| **TEACHER’S VOICE**  *(How was your experience ? personal comments)*  **PUPILS’S VOICE**  *(How was the reaction of the children ?)* |
| **FEEDFORWARD**  *(Do you have tips for other users of this format ?)* |
| **FEEDBACK**  *(Any user of this format can write feedback on the activity)*  **Person 1:** *(write your name)*  Feedback:  (*Write your feedback)*  **Person 2:** *(write your name)*  Feedback:  *(write your feedback)*  **Person 3:** *(write your name)*  Feedback:  *(write your feedback)* |