

Performance sheet student

General info about student

First name

Last name

E-mail

Studies

Home country

Info about secondary school

Name of the school

Name contact person

E-mail contact person

Telephone contact person

Info about activity at school

Date of the activity: Duo or solo:

Number of sessions / presentations: Physical or virtual:

Description of activity (±2 sentences)

.....

Age category target group:	6 - 9	9 - 12	12 - 14	14 - 16	16 - 18
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How you experienced your performance:	1 (poor)	2 (fair)	3 (good)	4 (very good)	5 (excellent)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pictures [Please add picture(s) as attachment]

I agree that pictures, taken during the activity might be used for promotion of the project: Yes / No

Info about payment

Bank name

Bank account number

BIC number

Name of account holder

Signature + stamp of school

Signature contact person school:	Date:	Stamp of school
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