

(7) OVERALL COMMENTS ON CANDIDATE’S PERFORMANCE

Lined area for writing overall comments on candidate's performance.



CARIBBEAN EXAMINATIONS COUNCIL

CARIBBEAN ADVANCED PROFICIENCY EXAMINATION®

STATEMENT FORM FOR PRACTITIONER

PERFORMING ARTS
UNIT 2 - OPTION C – DRAMA

PAPER 01

(This record is confidential and must be kept secure)

NAME OF CENTRE: _____

CENTRE CODE: _____

NUMBER OF CANDIDATES IN TEACHING GROUP: _____

NAME OF TEACHER: _____

TEACHER’S SIGNATURE: _____

NAME OF EXTERNAL EXAMINER: _____

EXTERNAL EXAMINER’S SIGNATURE: _____

NAME OF PRINCIPAL: _____

PRINCIPAL’S SIGNATURE: _____

For Use By
Practitioner

DATE: _____

DATE: _____

DATE: _____

(Please place a tick (✓) in the appropriate boxes and write your comments in Section 7 overleaf).

<p>(1) TASKS UNDERTAKEN BY CANDIDATES</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p> <p>8. _____</p> <p>9. _____</p> <p>10. _____</p> <p>Any other tasks undertaken:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>(2) KNOWLEDGE AT START OF THE APPRENTICESHIP</p> <p>Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/></p> <p>Satisfactory <input type="checkbox"/> Limited <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p> <p>KNOWLEDGE AT END OF THE APPRENTICESHIP</p> <p>Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/></p> <p>Satisfactory <input type="checkbox"/> Limited <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p> <p>(3) ATTITUDES TO TASKS/ASSIGNMENTS</p> <p>Level of interest (i)</p> <table style="width:100%; border: none;"> <tr> <td style="width:33%;"></td> <td style="width:16.6%;">Excellent</td> <td style="width:16.6%;">Very good</td> <td style="width:16.6%;">Good</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>Satisfactory</td> <td>Limited</td> <td>Unsatisfactory</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> <p>Attendance (ii)</p> <table style="width:100%; border: none;"> <tr> <td style="width:33%;"></td> <td style="width:16.6%;">Excellent</td> <td style="width:16.6%;">Very good</td> <td style="width:16.6%;">Good</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>Satisfactory</td> <td>Limited</td> <td>Unsatisfactory</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> <p>Punctuality (iii)</p> <table style="width:100%; 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