**ASSESSMENT OF ACTIVITY**

**INCREA+ Curriculum**

***For students***

|  |  |
| --- | --- |
| **TITLE of the activity you participated in** |  |
| **Teacher and school** |  |
| **Do you consider yourself at risk of exclusion?** | * Yes * No * I would prefer not to say |
| **How many sessions did you participate in?** |  |
| **What type of art was the activity based on?** |  |
| **Did you have any previous experience with this type of art, prior to the activity?** | * Yes * To some extent * No |
| **How do you feel about your art skills after the activity?** |  |
| **Did you feel the activity was easily accessible to you?** | * Yes * To some extent * No |
| **Were you provided with sufficient instructions?** | * Yes * To some extent * No |
| **Did you feel equally included in the activity?** | * Yes * To some extent * No |
| **Did you face any challenge in participating in the activity** | * Yes * To some extent * No |
| **If there was a co-facilitator, were they helpful?** | * Yes * To some extent * No * There was no co-facilitator |
| **Do you have a better understanding of the topic of inclusion?** | * Yes * To some extent * No |
| **Do you think the activity helped you and the others around feel more included?** | * Yes * To some extent * No |
| **The activity helped me develop these 21st century skills** | * Critical thinking * Communication skills * Creativity * Problem solving * Perseverance * Collaboration * Information literacy * Technology skills and digital literacy * Media literacy * Global awareness * Self-direction * Social skills * Literacy skills * Civic literacy * Social responsibility * Innovation skills * Thinking skills * None of the above |
| **Would you join art based activity again?** | * Yes, the same kind * Yes, if it is a different kind   Preferred type: visual art, plastic art, digital art, performance art   * No |
| **Do you have any comments or suggestions?** |  |