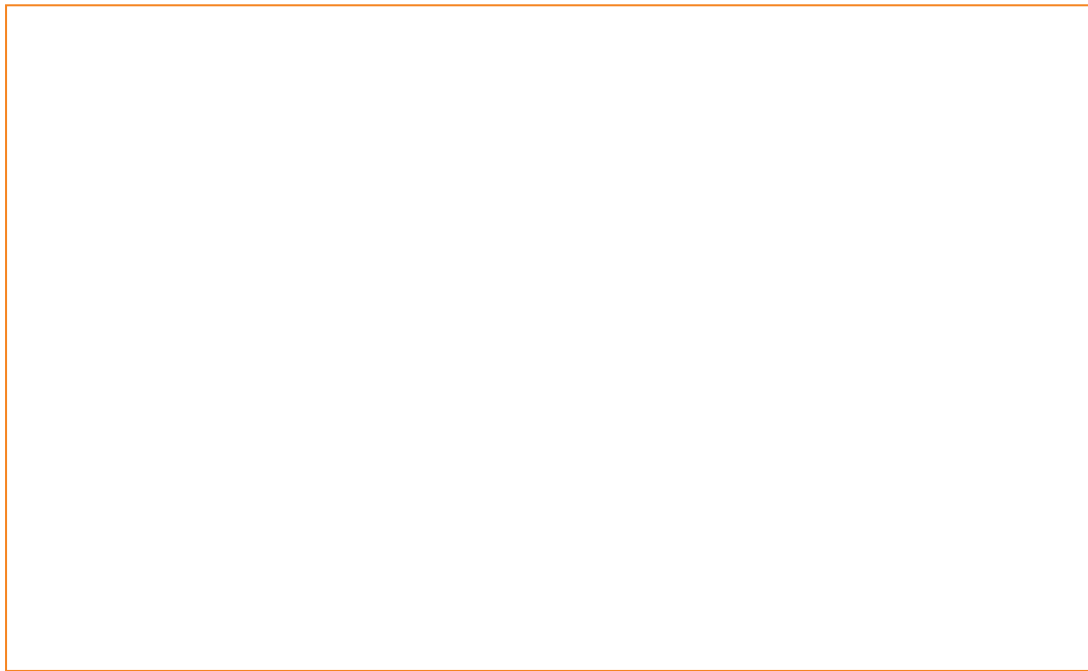


SELF-ASSESSMENT FOR INFANT CLASSES

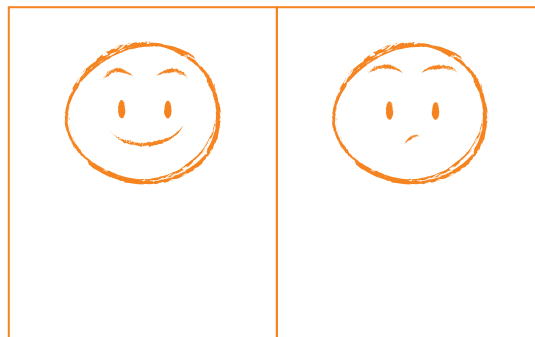
My name is:

Date:

Here is a picture of me kicking.



How did this activity make you feel?



Teacher's Comments: