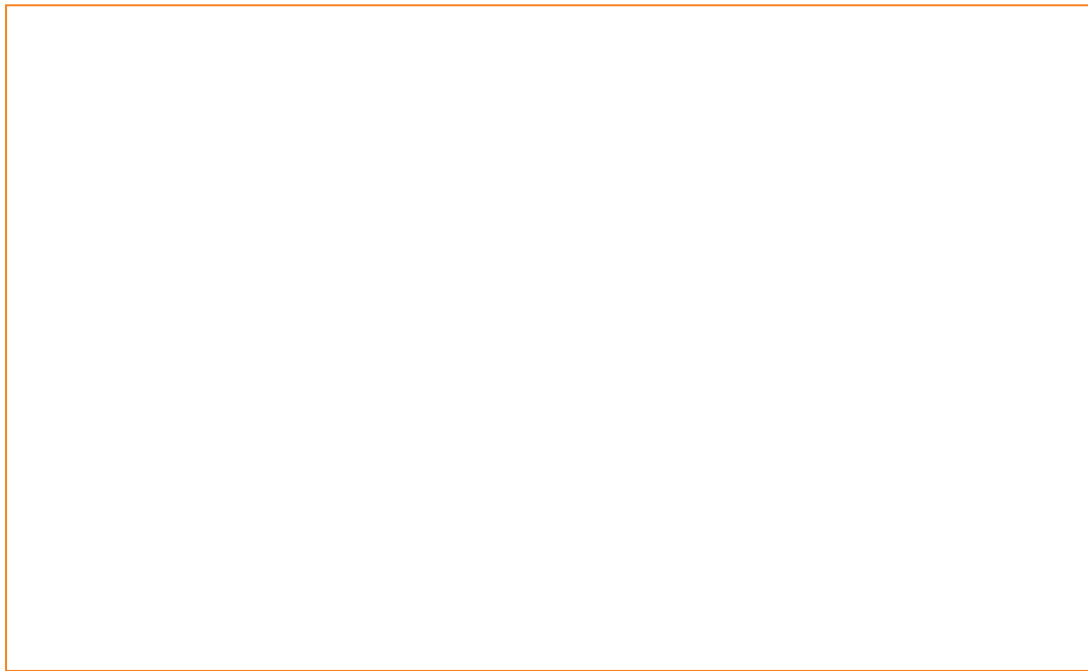


SELF-ASSESSMENT FOR INFANT CLASSES

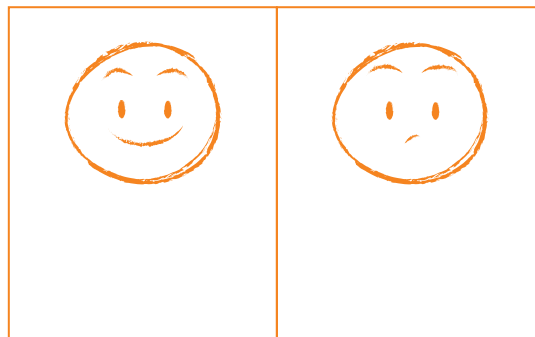
My name is:

Date:

Here is a picture of me throwing.



How did this activity make you feel?



Teacher's Comments:

A large, empty rectangular box with a thin orange border, intended for the teacher to write their comments.