



Intercultural educations by **M**eans of **P**artners working with **E**Cvet **T**ransfer

LdV (TOI): DE/10/LLP-LdV/TOI/147303

Product 5

IMPACT Assessment Sheet for Students





IMPAECT ASSESSMENT OF LEARNING OUTCOMES

NAME OF THE ORGANISATION/BODY

Click to write

STAMP AND SIGNATURE

Click to write

FULL ADDRESS

Street & Nr.: Click to write
Postcode & City: Click to write
Country: Click to write
Phone: Click to write

CONTACT PERSON (RECEIVING INSTITUTION)

Click to write

STUDENT

Surname: Click to write
First Name(s): Click to write
Date of Birth: Click to write
Nationality: Click to write

HOME EDUCATIONAL INSTITUTION

Name: Click to write
Street & Nr.: Click to write
Postcode & City: Click to write
Country: Click to write
Phone: Click to write

OFFICIAL TITLE OF THE QUALIFICATION

Click to write

DURATION OF MOBILITY/INTERNSHIP

Click to write

TEACHER/PROFESSOR OF RECEIVING INST.

Click to write

WORK PLACEMENT TUTOR

Click to write

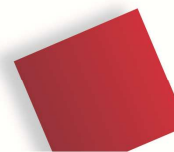
DESCRIPTION OF THE AGREED FIELD OF IMPAECT UNIT

	TOPIC	PLEASE TICK	DURATION
FIELD A:	THE SOCIETY	<input type="checkbox"/>	Click to write
FIELD B:	THE INSTITUTION	<input type="checkbox"/>	Click to write
FIELD C:	THE CHILD	<input type="checkbox"/>	Click to write
FIELD D:	THE FAMILY	<input type="checkbox"/>	Click to write



GD Bildung und Kultur

Programm für lebenslanges Lernen



UNIVERSITY
OF APPLIED SCIENCES
MUNICH

IMPAECT LEARNING OUTCOMES AGREED UPON IN DETAIL

FIELD	DESCRIPTION OF JOINT WORK TASKS OR PROCESSES/ACTIVITIES*
FIELD A (SOCIETY)	Click here to insert Text
FIELD B (INSTITUTION)	Click here to insert Text
FIELD C (CHILD)	Click here to insert Text
FIELD D (FAMILY)	Click here to insert Text
OPTIONAL STUDIES/WORK TASKS	Click here to insert Text

* THE SPECIFIC ACTIVITIES ARE TO BE AGREED UPON BY BOTH, PROFESSOR/TUTOR AND STUDENT, AT THE VERY BEGINNING OF THE MOBILITY/INTERNSHIP AND TO BE INSERTED HERE.

Dieses Projekt wurde mit Unterstützung der Europäischen Kommission finanziert. Die Verantwortung für den Inhalt dieser Veröffentlichung trägt allein der Verfasser; die Kommission haftet nicht für die weitere Verwendung der darin enthaltenen Angaben.



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IMPAECT ASSESSMENT OF LEARNING OUTCOMES IN DETAILS

PORTFOLIO (PLEASE TICK/MARK)

NOT APPLICABLE	POOR	SUFFICIENT	AVERAGE	GOOD	VERY GOOD
<input type="checkbox"/>					

THE INNER FRAME PROFESSIONAL ROLE

COMPETENCE TO	NOT APPLICABLE	POOR	SUFFICIENT	AVERAGE	GOOD	VERY GOOD
REFLECT UPON ONE'S OWN ATTITUDES, BEHAVIOUR & ROLE	<input type="checkbox"/>					
COPE WITH ONE'S OWN FEELINGS, LIKE FEELING STRANGE, IRRITATED, ETC.	<input type="checkbox"/>					
COPE WITH ONE'S OWN PREJUDICES, STEREOTYPES, ETC.	<input type="checkbox"/>					
UNDERSTAND DIFFERENT INDIVIDUALS	<input type="checkbox"/>					
TO COMMUNICATE WELL	<input type="checkbox"/>					

THE TWO DIMENSIONS

THE INDIVIDUUM THE SOCIETY	NOT APPLICABLE	POOR	SUFFICIENT	AVERAGE	GOOD	VERY GOOD
TO BROADEN THE UNDERSTANDING HOW KNOWLEDGE IS CONSTRUCTED IN AN INTERCULTURAL LEARNING PROCESS	<input type="checkbox"/>					
TO ASSURE THE RIGHTS OF THE CHILD AS A BASIC VALUE TO FULFILL	<input type="checkbox"/>					
TO PROMOTE DEMOCRATIC VALUES, EQUALITY, RESPECT FOR OTHER HUMAN- AND MINORITY RIGHTS	<input type="checkbox"/>					
TO WORK FOR SOCIAL PARTICIPATION	<input type="checkbox"/>					



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	COMPETENCES/LEARNING OUTCOMES (TO BE COPIED FROM DESCRIPTION)	NOT APPLICABLE	POOR	SUFFICIENT	AVERAGE	GOOD	VERY GOOD
Please choose Field	Click here to insert Text	<input type="checkbox"/>	→				
Please choose Field	Click here to insert Text	<input type="checkbox"/>	→				
Please choose Field	Click here to insert Text	<input type="checkbox"/>	→				
Please choose Field	Click here to insert Text	<input type="checkbox"/>	→				

PLEASE COPY & PASTE THIS TABLE IF NEEDED

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	COMPETENCES/LEARNING OUTCOMES (TO BE COPIED FROM DESCRIPTION)	NOT APPLICABLE	VERY GOOD	GOOD	AVERAGE	SUFFICIENT	POOR
Please choose Field	Click here to insert Text	<input type="checkbox"/>	→				
Please choose Field	Click here to insert Text	<input type="checkbox"/>	→				
Please choose Field	Click here to insert Text	<input type="checkbox"/>	→				

CITY, INSTITUTION & DATE _____ Click here to select date

TEACHER/PROFESSOR

TUTOR (AND STAMP)

STUDENT

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