

Stepping stones sheet

Embossed foil frame

Name.....

Things I'd like to learn with this project:

.....

.....

I've chosen it because:

.....

.....

.....

Other things I like making:

.....

.....

.....

When I've finished this project I'd like to try:

.....

.....

.....

Signed (Learner) Date.....

Signed (Facilitator) Date.....

Stepping through	
Name:	Facilitator/teacher:
Project: Embossed foil frame	Venue:
Date Started:	Date Completed:

Date:	Project:
What I did:	
How I felt about it	

Date:	Project:
What I did:	
How I felt about it:	

Date:	Project:
What I did:	
How I felt about it:	

How did I do?

Embossed foil frame

Name

What I made	
How I felt about making it	
How I feel now that I've finished!	
What I'd like to do now	
Signed by facilitator/teacher	Learner
Date	