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|  | Istituto Comprensivo “Giovanni Lilliu”Sede: Via Garavetti, 1 - 09129 Cagliari § Tel. 070/492737 § Tel. “Alfieri” 070.305719Cod. Mecc. CAIC8GA002 § Cod. Fisc. 92280270924 § CUU UFWG7KMail caic8ag002@istruzione.it - caic8ag002@pec.istruzione.it § Sito [www.icgiovannililliu.edu.it](http://www.icgiovannililliu.edu.it) |

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| **Scheda Monitoraggio Referente Commissione** |

**DENOMINAZIONE COMMISSIONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DOCENTE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1.Attività svolte:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**2.Lavori prodotti**

* Sì
* NO

**Se SÌ, indicare quali: : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**3.Lavori pubblicati**

* Sì
* NO

**Se SÌ, indicare quali: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**4.Rapporto di collaborazione con i componenti della commissione?**

* Ottimo
* Buono
* Sufficiente
* Non sufficiente

**5. In che maniera gli obiettivi della commissione sono stati perseguiti e raggiunti?**

* Ottima
* Buona
* Sufficiente
* Non sufficiente

**Punti di forza dell’attività svolta:**

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**Punti di criticità dell’attività svolta:**

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**Eventuali suggerimenti per il prossimo anno scolastico**

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**Si allega prospetto ore svolte da ciascun membro della commissione.**

**Il Referente della Commissione**

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