**Exit ticket -My Concept Audit form**

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| **Topics** | **Starter (0/1/2)** | **After Activity (0/1/2)** | **End**  **(0/1/2)** |
| **1. Balanced Diet** |  |  |  |
| **2. Chemical Digestion** |  |  |  |
| **3. Mechaical Digestion** |  |  |  |
| **4.Tyes of Teeth** |  |  |  |
| **5.Absorption** |  |  |  |

**The (0/1/2) refers to a rating system of demonstrating confidence:**

0 = I am not confident about my knowledge and understanding of this topic

1 = I am fairly confident about my knowledge and understanding of this topic

2 = I am very confident about my knowledge and understanding of this topic