



Activity Passport

Name: \_\_\_\_\_

**Year 6**



**Activity**

	✓	Date
1. Keep a diary for a week	<input type="checkbox"/>	<input type="text"/>
2. Take a trip on a train	<input type="checkbox"/>	<input type="text"/>
3. Send an email	<input type="checkbox"/>	<input type="text"/>
4. Learn to knit	<input type="checkbox"/>	<input type="text"/>
5. Write a speech	<input type="checkbox"/>	<input type="text"/>
6. Vote in a school election	<input type="checkbox"/>	<input type="text"/>
7. Plan a tour around your local area	<input type="checkbox"/>	<input type="text"/>
8. Interview someone	<input type="checkbox"/>	<input type="text"/>
9. Visit a local charity and find out how you can support them	<input type="checkbox"/>	<input type="text"/>
10. Learn how to access the news	<input type="checkbox"/>	<input type="text"/>
11. Design a product or business idea and pitch it to 'investors'	<input type="checkbox"/>	<input type="text"/>
12. Choose objects to put in a time capsule	<input type="checkbox"/>	<input type="text"/>
13. Write and record/broadcast a radio play	<input type="checkbox"/>	<input type="text"/>
14. Sleep under canvas	<input type="checkbox"/>	<input type="text"/>
15. Make a dessert	<input type="checkbox"/>	<input type="text"/>
16. Organise tea for parents and carers	<input type="checkbox"/>	<input type="text"/>
17. See the sun set	<input type="checkbox"/>	<input type="text"/>
18. See the sun rise	<input type="checkbox"/>	<input type="text"/>
19. Go on a picnic	<input type="checkbox"/>	<input type="text"/>
20. Visit a new city	<input type="checkbox"/>	<input type="text"/>