

Shri. Bapusaheb D. D.Vispute College of Education, New Panvel

Feedback Sheet for Internship Program

(AaMtrvaaisata p`%yaaBarNa t@ta)

Name of School & Address: _____

Duration of Internship program: _____ to _____ Name of Mentor: _____

R. No.	Name of Student-teacher / Ca~aQyaapkacao naava	R. No.	Name of Student-teacher / Ca~aQyaapkacao naava

(The following sheet should be filled by the principal only.)

Sr. No	Observational Points / inarIxaNaa%mak mau_o]%kRY z Excellent	AitSaya caaMgala Very Good	caaMgalaa Good	Bara Fair	samaa Qaana kark Satisfactory
1	ivaVaQyaa-caopirpazatIlla yaaogadana Contribution in Assembly					
2	pazacyaa pQdtI p`maaNaooAQyaapna Steps of Lesson being followed by students.					
3	mau#yaaQyaapk va iSaxakaMSal yaaogya samanvaya va sausaMvaad Communication with Principal & Staff for Co-ordination.					
4	dOnaMidna va saaPtaihka vaolap~kacal tyaarl va pUvasaUcanaa Intimation & preparation of Timetable and Weekly Schedule.					
5	ivaVaQyaa-Mcaa va>SalrpNaa va vat-NaUk Punctuality & Behavior of the students.					
6	ivaivaQa Saalaoya kaya-ËmaaMcao Aayaaojana Organization of various activities.					
7	GaTk caacaNalcal tyaarl va Aayaaojana Preparation & Organization of Test.					
8	iSaxako<ar kma-caa-yaaMSal Saalaoya naaoMdl imaLivaNyaasaazI sausaMvaad Interaction with office staff for Obtaining Record.					
9	Saalaoya iSastIcao palana Observing the school discipline.					
10	ekMdrIt gaTacao Ca~saovaakalaatIlla vat-NaUk Overall Performance of Group.					
11	ivaVaqaI- iSaxakaMcaa AQyaapna djaa-]McaavaNyaasaazI sava- saaQaarNa saucanaa / General Instruction for Improving professional development: _____ _____ _____ _____					

Date:

Place:

Sign of Principal & Stamp of School