

**NIOS STUDY CENTRE,
JIRAL Jr. COLLEGE, JIRAL,
DHENKANAL**

Date: 26/11/2018

All the teacher trainees under NIOS (D.El.Ed) programmed (Unit-I & II) are hereby informed to submit records as under on 02/12/2018 (Sunday) at 11:00 A.M.

1. WBA (Code-513)
2. Practice Teaching (Lesson Plan, Code-514)

- The above records must be completed in all respect and properly signed by the trainee/ Head Master of the school/ Mentor.
- The WBA shall be assessed as bellow.
 - Concept mapping in any two subjects- language, Maths, EVS, Sc/S.Sc.(8x2) 16 marks
 - Acting on Art, Physical & Health and Work Education (3x8) 24 marks
 - Analysis of Time Table/annual activity calendar 10 marks
 - School community relationship 10 marks
 - Seminar presentation 20 marks
 - Participation on process evaluation 20 marks

Total 100 marks

A teacher trainee will be required to give 10 practice lessons in each of the four subjects (Language, Mathematics, Environmental Studies and Science/ Social Science) She/he will be allotted to a mentor and supervisor in the school (a senior teacher of the subject) the mentor in each subject will supervise at least 5 out of 7 lessons and supervisor will supervise 2 out of 3 lessons.

The Evaluative Criteria for assessing the level of performance of a candidate in practice teaching lessons will be as under

- Lesson planning
- Subject matter competence
- Teacher's guidance
- Pupil participation in the lesson& its management
- Pupil Evaluation
- Evaluation of Practice Teaching process by Head of the school

For convenience sake each lesson will initially be assessed on a total of 75 marks with the assigned weightage for each evaluated criterion. The head of School will submit a practice teaching evaluation report for each trainee out of 25 marks on Personal Characteristics, Participation in co-scholastic activities, participation in school work, teaching and originality and novelty. As the overall weightage to practice teaching in the total scheme of evaluation is 75 marks and since there are 40 lessons the obtained score on each lesson will be added up and divided by the lessons observed to get the final score (rounded off) will be added to the evaluation of Head of School out of 25 for each teacher trainee. The total marks scored will be multiplied by 2 to have the final score out of 200 on Practice Teaching for purposes of certification.

In the teaching competency mapping profile, in addition to the space for writing, observation there will also be mention of different criteria with the weightage in the form of rating scale as under required to be filled up by the mentor and the supervisor.

Evaluation criteria	Max marks	Obtained marks	Remarks
Lesson planning	20		
Subject matter competence	15		
Teacher's guidance	15		
Pupil participation in the lesson & its management	15		
Pupil Evaluation	10		
Evaluation of Practice Teaching process by Head of the school	25		
Total	100*2=200		

✓ Please attach the above form in three copies with your lesson plan.

Delivery of lesson during Practice Teaching

Name of the Subject No. of lessons to be	evaluated by Mentor	No. of lessons to be	evaluated by Supervisor
Language	5 out of 7	2 out of 3	10
Mathematics	5 out of 7	2 out of 3	10
Environmental study	5 out of 7	2 out of 3	10
Science/ Social Science	5 out of 7	2 out of 3	10
Total	20 out of 28	8 out of 12	40

(Four in multigrade/ multiple class contexts to be supervised by Supervisor)

Note: The Practice Teaching (PT) need be conducted at the beginning of the session of the second year.

The following forms are to be attached with WBA (Code-513) records. Duly filled in and signed by the concerned Trainee/ Mentor/ H.M.

**Sri Dijaraja Biswal,
Coordinator**



NIOS Study Centre/Workshop Centre _____

D.El.Ed. Programme

(To be filled by the Teacher Trainees)

- 1. Name and Code of the Programme Study Centre-----
- 2. Full Name of the student in CAPITAL LETTERS-----
- 3. Enrolment No.-----4.Optional Subject-----
- 5. Address of the Working School with PIN & Telephone No. with code-----
- 6. Full name of the Headmaster of the Working School (CAPITAL LETTERS)-----
- 7 Full name & address of the Mentor-----
- Guided and observed lessons in Subject (Language No.)-----Maths (No.)-----EVS (No.)-----Sc./S.Sc.(No.)-----
- 8. Full name & address of the Supervisor-----
- Guided and observed lessons in SubjectLanguage (No.)-----Maths (No.)-----EVS (No.)-----Sc./S.Sc. (No.)-----

Certificate from the Head Master of the School where the Teacher Trainee is working

Certified that Sh./Smt.----- (Full Name of the Trainee) a bearing Enrol.No.----- has been working as a regular teacher in this.

School Seal

Full signature of the Head Master

Date:

Office Seal

DECLARATION BY THE TRAINEE

- 1. Hereby I declare that all the statements contained in this proforma have been written by me in my own hand: which are true and if one of them is found false/fabricated I shall accept the decision of the NIOS Regional Centre, Ranchi in the matter without any protest.
- 2. I also declare that I have completed the following activities (as per NIOS guidelines issued to me at the time of admission and the Workshop-I) in the School under the guidance and supervision of the concerned persons and obtained their certificates/signatures as per instructions.
Lesson Plans (10) each in three compulsory teaching subject and (10) in optional teaching subject. Lessons started on----- (date) & completed on----- (date).
- 3.Further, I declare that if I am asked by the Workshop Coordinator I shall discontinue attending the Workshop-II from the day I if I am found irregular. I shall attend the workshop- II next year forgoing the present one.
- 4. Further, I declare that I worked under the Mentor and Supervisor who supervised my classes during Practice Teaching
- 5. Lastly, I declare that all the statements made in this proforma are true and if anything is found wrong or misleading or deficient or forged during scrutiny, I shall accept the decision of the NIOS: Regional Centre without any protest and prejudice.

Full signature of the Head MasterFull signature of the Teacher Trainee

Date:

HM's Seal

Date:

Note: This paper with all entries is to be submitted at the time of reporting on the first day of the workshop-II.



NIOS Study Centre/Workshop Centre _____
D.El.Ed. Programme

DECLARATION BY THE MENTOR AND SUPERVISOR
(To be filled in by the Mentor/Supervisor in his/her own hand)

The Headmaster and the Mentor are requested kindly to cooperate with NIOS in maintaining and improving the quality of its D.El.Ed Programme so as to produce better teachers.

(To be filled by Teacher trainee)

1. Name and Code of the Programme Study Centre-----
2. Full Name of the student in CAPITAL LETTERS-----
3. Enrolment No.-----4. Optional Subject-----

(To be filled by the Mentor)

Full name of the Mentor (in CAPITAL LETTERS)-----
Qualification-----Teaching Experience:----- years
(please write in word)

I certify that.

I have guided and supervised 28 practice lessons delivered by the above-named trainee in this School in **Languages(7), Mathematics(7), EVS(7), Sc./S.Sc. (7)** as per the guidelines of NIOS during the period from------(date) to------(date).

I declare that all the entries in this proforma have been made by me in my own hand which are true.

Full signature of the Mentor

Date:

(To be filled by the Supervisor)

Full name of the Supervisor (in CAPITAL LETTERS)-----
Qualification-----Teaching Experience:----- years
(please write in word)

I certify that

I have guided and supervised 12 practice lessons delivered by the above-named trainee in this School in **Languages(3), Mathematics(3), EVS(3), and Sc./S.Sc.(3)**, as per the guidelines of NIOS during the period from------(date) to------(date).

I declare that all the entries in this proforma have been made by me in my own hand which are true.

Full signature of the Supervisor

Date:

Note: This paper with all entries is to be submitted at the time of reporting on the first day of Workshop-II



NIOS Study Centre/Workshop Centre _____

D.El.Ed. Programme

Declaration about (40) Practice Lessons

(To be filled by the Teacher Trainee in his/her own hand in black- ink pen)

Use four proformas for four Subjects

1. Name and Code of the Programme Study Centre-----

2. Full Name of the student in CAPITAL LETTERS-----

3. Enrolment No.-----

4. Optional Subject-----10
 lessons have been delivered in each Subject(Language, Mathematics, EVS, Sc./S.Sc.) (use separate sheet for each subject)

Full name of the Mentor-----

Sl.No.of Lesson	Date	Period	Name of the Topic	Details of the Teaching Aids Used	Supervised by Mentor
Mr./Mrs.				Supervisor	Mr./Mrs.
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Certified that these lessons were delivered by the above-named Trainee in this School (as per NIOS SC guidelines) on the dates and periods as mentioned above

Full signature of the Head Master **Full signature of the Teacher Trainee**

Date: _____ **Date:** _____

Note:

- Lesson Plans should contain comments ,suggestions, corrections, etc. made by the Mentor/Supervisor
- Mere mention of lesson delivered will not do. Such lessons will be cancelled .
- All original lesson plans in one volume along with TCMPs duly signed by the Mentor/Supervisor and countersigned by the Head Master with date should be submitted at the Programme Centre on the first day of the workshop-II .
- The Head Master should certify the completion of 10 lessons on the inner cover page of the lesson plan volume.
- The Certificate is- Certified that there are 10 lessons plans in this volume which were delivered by the abovementioned student in the school in the presence of the Mentor and supervisor as per the guidelines of NIOS Study Center.(Lesson Plans and TCMPs are to be submitted on the first day of the workshop-II.)

Note: This paper with all entries needs to be submitted at the time of reporting in the first day of the workshop-II.

FORMAT FOR LESSON NOTE/ DIARY

Name of the Teacher Trainee :

Enrolment No :

Date :

Class & Section :

Teaching Learning Materials Used:

Subject :

Period & Duration of the class :

Topic :

Teaching Points (Concepts) :

Learning Objectives :

Strategies adopted :

Brief description of learning activities:

Evaluation strategies :

Home assignment :

Signature of Mentor/Supervisor

Date:

Signature of Teacher Trainee

FORMAT FOR LESSON OBSERVATION

Name of the Work place : _____
 Date: _____
 Name of the Trainee-Observer: _____ Class: _____
 Enrolment No. : _____
 Period : _____
 Method Subject : _____
 Subject : _____
 Topic : _____
 Name of the Demonstrator : _____

Steps	Teaching Points	Learning Activities	Suggested Alternate/additional activities	Reasons for suggesting alternate/additional activities
Introduction				
Presentation				
Evaluation (Assignment)				

Any other observation:

*Full signature of Teacher Trainee
 whose lesson is observed*

Signature of the Trainee Observer

Total marks out of 10:

Signature of Resource Person

RATING SCALE FOR ANALYSIS OF SCHOOL TIME TABLE

To be used by the workshop coordinator /Resource Person in the Workshop

Name of the teacher trainee :

Enrolment No. :

Name of the School :

Rating need to be done according to the following criteria:

Criteria School Time-Table	Ratings (5-Excellent, 4-Very Good, 3-Good, 2-Average, 1-Unsatisfactory)				
- Steps to avoid overlapping of period	5	4	3	2	1
- Placement of subject according to its difficulty level	5	4	3	2	1
- Steps to alleviate excessive burden on students :	5	4	3	2	1
a) Variety in activities for curricular transaction					
b) Placement of co-curricular activities					
- Structure of the report	5	4	3	2	1

Has a copy of the time-table be appended along with report? Yes/No

Total Marks out of 20:
(to be converted out of 10)

Signature of the Workshop Coordinator/Resource Person

RATING SCALE FOR ANALYSIS OF CALANDER ACTIVITY

To be used by the workshop coordinator /Resource Person in the Workshop

Name of the teacher trainee :

Enrolment No.: :

Name of the School :

Rating need to be done according to the following criteria:

Criteria Calendar of activities	Ratings (5-Excellent, 4-Very Good, 3-Good, 2-Average, 1-Unsatisfactory)				
- Inclusion of varieties of activities	5	4	3	2	1
- Placement of right kind of activities in the proper place	5	4	3	2	1
- Steps to alleviate excessive burden on students :	5	4	3	2	1
- a) Variety in activities for curricular transaction					
- b) Placement of co-curricular activities in the calendar					
- Placement of evaluation activities	5	4	3	2	1
Has a copy of the calendar activity be appended along with report?					Yes/No

Total Marks out of 20:
(to be converted out of 10)

Signature of the Workshop Coordinator/Resource Person

RATING SCALE FOR SEMINAR PRESENTATION

Presentation of Teacher Trainee to be rated by the Workshop Coordinator.

Name of the Teacher Trainee :

Enrolment No. :

Topic :

Time Duration of the presentation :

Rating need to be done according to the following criteria:

Criteria	Rating (5-Excellent, 4-Very Good, 3-Good, 2-Average, 1-Unsatisfactory)				
- State of preparedness of the student teacher	5	4	3	2	1
- Reading skill	5	4	3	2	1
- Relevance of the seminar topic to issue related to Education	5	4	3	2	1
- Self Confidence	5	4	3	2	1
- Accuracy of facts	5	4	3	2	1
- Organization of presentation	5	4	3	2	1

Total Marks out of 30:
(to be converted out of 20)

Signature of Workshop Coordinator/ Resource Person or his/her nominee

RATING SCALE FOR PARTICIPATION (PROCESS EVALUATION) IN WORKSHOP

(To be filled in by the workshop Coordinator for each day of the workshop)

Name of the Teacher Trainee :

Enrolment No. :

Name of the study centre :

Rating need to be done according to the following criteria:

Criteria	Rating (5-Excellent, 4-Very Good, 3-Good, 2-Average, 1-Unsatisfactory)				
(i) Participation(leadership, emotional stability, Cooperation, raising questions, responding)	5	4	3	2	1
(ii) Punctuality	5	4	3	2	1
(iii) Sincerity	5	4	3	2	1
(iv) Regularity	5	4	3	2	1
(v) Actual attendance (number of sessions)	5	4	3	2	1

Comments and remarks:

Total Marks out of 20:

Signature of Workshop Coordinator/ Resource Person or his/her nominee

RATING SCALE FOR SELF- DEVELOPED TEACHING LEARNING MATERIALS (TLMS)

Teaching aid prepared by teacher trainee is to be rated by the resource person

Name of the teacher trainee :

Enrolment No. :

Name of the aid : Class for which the aid is meant:

Type of aid (audio/visual/ audio-visual):

Rating need to be done according to the following criteria:

Criteria	Ratings (5-Excellent, 4-Very Good, 3-Good, 2-Average, 1-Unsatisfactory)				
	5	4	3	2	1
- Relevance of the aid according to :	5	4	3	2	1
a) Teaching-learning context					
b) Cognitive level of students					
c) Appropriateness of the aid					
- Fulfillment of the specified objectives of preparation of aid	5	4	3	2	1
- Use of locally available (inexpensive indigenous) material for preparation of aid	5	4	3	2	1
- Effectiveness of the aid in :	5	4	3	2	1
a) Attracting students attention					
b) Clarifying concepts					
c) Achieving objectives of the lessons					
d) Accuracy of the size of model					

Total Marks out of 20:

Signature of Workshop Coordinator/ Resource Person or his/her nominee

RATING SCALE FOR EVALUATION OF REPORT ON COMMUNITY PARTNERSHIP

The report of the teacher trainee on “The relationship of the school and community and role of the teacher” (suggested in 3 activities in Workshop-II) is to be evaluated by the resource person on the basis of the following criteria.

Name of the teacher Trainee :

Enrolment No.:

Rating need to be done according to the following criteria:

Criteria	Ratings (5-Excellent, 4-Very Good, 3-Good, 2-Average, 1-Unsatisfactory)				
- Identification of school and community partnership	5	4	3	2	1
o Identification of school roles					
o Identification of community roles					
o Utilization of school resources for community					
o Utilization of community resources for school					
- Role of the teacher to meet the challenges on the school and community partnership	5	4	3	2	1
- Identification of problems encountered	5	4	3	2	1
- Formulation of the solution to the problem	5	4	3	2	1

Total Marks out of 20:
(to be converted out of 10)

Signature of Mentor/Supervisor/Resource Person