## SELF-APPRAISAL FORM FOR TEACHERS

15.03.2017

| Name of teacher:            |                  |               |                           |              |  |
|-----------------------------|------------------|---------------|---------------------------|--------------|--|
| Qualifications              |                  |               |                           |              |  |
| Date of Joining             | 7                |               |                           |              |  |
| Total teaching              | Experience       |               |                           |              |  |
| Designation                 |                  |               |                           |              |  |
| Residential Address         |                  |               |                           |              |  |
|                             |                  |               |                           |              |  |
|                             |                  |               |                           |              |  |
| Mobile Phone Numbers        |                  |               |                           |              |  |
| Name/Phone no. in emergency |                  |               |                           |              |  |
| Blood group                 |                  |               |                           | _            |  |
| Type of appoin              | tment (Tick one) | : Permanent / | : Permanent / Probationer |              |  |
| Teaching-periods per week   |                  |               |                           |              |  |
| Classes/sectio              | ns/subjects taug | ht in year    |                           |              |  |
| Class                       | Subject          | Average Mark  | Maximum Mark              | Minimum Mark |  |
|                             |                  |               |                           |              |  |
|                             |                  |               |                           |              |  |
|                             |                  |               |                           |              |  |
|                             |                  |               |                           |              |  |
|                             |                  |               |                           |              |  |

| Did you take any "remedial" classes? If yes, please give details of subjects, classes, number of children and how many periods you do so until now. If applicable, name a couple of weak children to whom you provided additional inputs and guidance. |
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| Could you please name a couple of bright children you came across? What steps did you take to improve them further?  |
| Please list other responsibilities you took up in year   |
| Co-curricular  |
| Extra-curricular   |
| Administrative   |
| Any Others   |
| Would you like to name any other contribution of yours, which the same may not know about?   |
| Did you go any educational excursions or trips this year? Please list them and give details of the same.   |
| Did you attend any seminars, workshops or training programs on behalf of the school? Please furnish details. Which programs do you wish to go?   |

| Have you contributed towards any student achieving something significant? Please give details.  |
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| Have you contributed to any teacher achieving something significant? Please give details.   |
| Are there any areas that interest (activities) you but you did not get a chance to explore and contribute. What are they? Would you like to explore them? |
| What are the improvements you would like to bring about in <b>you</b> to improve your contribution as a teacher?  |
| Do you plan to adopt any new teaching ideas or pedagogical techniques to improve your contribution as a teacher?  |
| What are the improvements you would like to see in you as a person?   |
| What is the support or help or inputs you require from school to enable you contribute better?  |
| Name five areas upon which our school should focus upon to improve itself.  |
| Signature of Teacher:   |
| HOD:  |
| Remarks, signature of Principal:  |