

## SARBA SIKSHA MISSION, SOUTH 24 PARGANAS


### NOTICE

At present different training programme is conducted by SSM & RMSA throughout the district. To know its success in the school level with its usefulness, acceptability etc. a format is framed (copy enclosed) and as desired by the district authority it will be filled up by all teachers (both primary and secondary) KRP etc. which shall be countersigned by the Head of the Institution and shall be sent to the District Project Office, SSM, South 24 Parganas.

The feedback of all concerned will be discussed in the district level and the extract will be sent to State Project Office for their perusal.

Therefore, all concerned are requested to fill up the enclosed format carefully and send to this office twice a year (preferably in the month of July and December).

Enclosure : As stated above.

  
District Project Officer,  
SSM, South 24 Parganas.  
Date : 24-7-17

Memo No. : SSM/S. 24 Pgs./Red/950 (7)  
Copy forwarded to the :-

- 1) Additional District Magistrate (SSM), South 24 Parganas.
- 2) Chairman, South 24 Parganas District Primary School Council.
- 3) Karmadhyaksha (SSTK), South 24 Parganas Zilla Parishad.
- 4) District Inspector of Schools (PE/SE/Academic), South 24 Parganas.
- 5) Circle Project Co-ordinator (all), South 24 Parganas.
- 6) Head of the Institution, Primary/Secondary School (all), South 24 Parganas with a request to inform the matter to all Assistant Teachers of his school.
- 7) KRP (all), South 24 Parganas.

  
District Project Officer,  
SSM, South 24 Parganas.

# SSM & RMSA, SOUTH 24 PARGANAS

## REPORT ON FOLLOW UP TRAINING

Name of CLRC :----- Report:( 1<sup>st</sup> time/ 2<sup>nd</sup> time):-----

Name of the School:----- DISE CODE:-----

1.Name of workshop which you have participated.-----Pry/UP:-----

2.Explain your experience about the workshop:-----  
-----  
-----

3.New ideas from the workshop which you have learned -----  
-----  
-----

4.Your sharing with HM/TIC after workshop:-----  
-----

5.Kinds of Hard spot which you have faced in classroom situation :-----  
-----

6.How do you have changed the mode of teaching/lesson plan etc to enhance the motivation of the students? :-----  
-----

7. Explain the Behavioural changes have you watched from the students? :-----  
-----  
-----

8.a)How much applications of new methodology taught during the training could be made?

b) If no then why?-----

9.What do you suggest to make training more applicable for children?-----  
-----

10. Your overall opinion about the workshop:-----  
-----  
-----

Signature of the Trainer/Trainee:

Signature of the Head of the Institution

(With Office Seal)

**N.B: a)** This format shall be filled in twice in a year.

b) Filled in format shall be sent to [ssa\\_south@rediffmail.com](mailto:ssa_south@rediffmail.com)