

Tribhuvan University
Faculty of Education
Dean's Office
Micro Teaching Evaluation Form

Campus:

Level:

Specializations:

Academic Year:

S.N.	Symbol No.	Name of the Student	Lesson Plan	Teaching Aids	Knowledge of subject matter	Teaching Strategies	Class room management	Peer Observation	Total
			4	2	3	3	2	1	15
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									

Signature:

Internal supervisor:

Date:

Tribhuvan University
Faculty of Education
Dean's Office
Peer Teaching Evaluation Form

Campus:

Level:

Specializations:

Academic Year:

S. N.	Symbol No.	Name of the Student	Lesson Plan	Teaching Aids	Knowledge of subject matter	Teaching Strategies	Classroom management and assessment	Peer Observation	Total
			5	2	4	5	2	2	20
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									

Signature:

Internal supervisor:

Date:

Tribhuvan University
Faculty of Education
Dean's Office
Internal Supervisor Evaluation Form

Campus:

Level:

Specializations:

Academic Year:

S.N.	Symbol No.	Name of the Student	Lesson Plan	Teaching Aids	Knowledge of subject matter	Teaching Strategies	Classroom management and assessment	Peer Observation	Report Writing		Total
									Presentation	Organization	
			4	2	3	3	2	1	3	2	20
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											

Signature:

Internal supervisor:

Campus:

Date:

Tribhuvan University
Faculty of Education
Dean's Office
Co-operating Institution Supervisor Form

Co-operating Institution:

Campus:

Level:

Specializations:

Academic Year:

S.N.	Symbol No.	Name of the Student	School Performance		Total	Remarks
			Students Teacher's Impression	Regularity		
			3	2		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

Signature:

Co-operating institution supervisor:

Co-operating institution:

Date:

Tribhuvan University
Faculty of Education
Dean's Office
External Supervisor Evaluation Form

Campus:

Level:

Specializations:

Academic Year:

S.N.	Reg. No.	Symbol No.	Name of the Student	Co-operating Institution	Teaching Performance in School					Report writing		Total
					Lesson Plan	Teaching Aids	Knowledge of subject matter	Teaching Strategies	Classroom management and assessment	Presentation	Organization	
					6	4	5	6	4	8	7	
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												

Signature:

External supervisor:

Campus:

Date:

Tribhuvan University
Faculty of Education
Dean's Office
Final Internal Evaluation Form

Campus:

Level:

Specializations:

Academic Year:

S.N ·	Reg. No.	Symbol No.	Name of the Student	Co-operating Institution	Evaluation of Micro Teaching	Evaluation of Peer Teaching	Evaluation of School Teaching	School Evaluation	Total
					15	20	20	5	60
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									

Head
Teaching Practice

Signature:
Internal supervisor:
Campus:
Date:

**Tribhuvan University
Faculty of Education
Dean's Office
Attendees**

Campus:

Level:

Specializations:

Academic Year:

S.N.	Reg. No.	Symbol No.	Name of the Student	Co-operating Institution	Teaching Subject	Class	Lesson Plan No	Test Item		Peer Observation	Overall Report	Examination Date	Sign	Remarks
								Objectives	Subjective					
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														

Signature:
Internal supervisor:
Campus:
Date:

Signature:
External supervisor:
Campus:
Date: