

## DAV PUBLIC SCHOOL

## Balbhadrapur, Kotdwara (U.K)

## WORKSHOP FOR TEACHERS IN ICT (U.K. ZONE) ON 27 August 2016

## **Participation Performa**

| Name of the School (with complete mailing address) |                                 |                   |                  |  |  |
|--|---------------------------------|-------------------|------------------|--|--|
|  |                                 |                   |                  |  |  |
| Contact No. (with STD code)                        |                                 |                   |                  |  |  |
|  | E-mail Address:                 |                   |                  |  |  |
| Name of the Teachers                               |                                 |                   |                  |  |  |
| 1  | _(Mobile No.)                   |                   | _ (Primary)      |  |  |
| 2  | _(Mobile No.)                   |                   | _(Middle)        |  |  |
| 3  | _(Mobile No.)                   |                   | _ (Secondary)    |  |  |
| 4  | _(Mobile No.)                   |                   | _(Sr. Secondary) |  |  |
| Date & Time of Arrival                             |                                 | Mode of Transport |                  |  |  |
| If Pickup Facility Required (Y/N)                  |                                 |                   |                  |  |  |
| Date & Time of Departure                           | Mode of Transport               |                   |                  |  |  |
| If Drop out Facility Required (Y/N) _              | If yes, please give the detail. |                   |                  |  |  |
| Stay Arrangement Required/ Not Re                  | equired                         |                   |                  |  |  |
| If required, then No. of Gents Staff:              | No. of Ladies Staff:            |                   |                  |  |  |

**Seal and Signature of Principal** 

**Date** 

| SUBJECT ENRICHMENT PROFORMA |  |                                |                                      |  |  |
|-----------------------------|--|--------------------------------|--------------------------------------|--|--|
| Name of School :            |  |                                |                                      |  |  |
| Subject                     | Topics where Discussion/<br>Support required | Newly Introduced Topic, if any | Name of the teacher<br>& Designation |  |  |
|                             |  |                                |                                      |  |  |
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