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Fifth Annual Excellence Award 2018-'19 **NOMINATION FORM**

Form No.2

- To be filled up by the Proposer's in his / her own handwriting.
- Please answer these questions honestly and frankly to the best of your knowledge.

SANSKRIT PATHSHALA EDUCATOR AWARD

The	name of the applicant you wo	uld like to noi	minate for tl	his award	
		Ge	nder:	D.O.B	Age
Date	of Joining Positi	on	Contact N	lo. of applicant	
	of Current School / Organization / Institu				
Class	es / Subject Taught / Work specification :				
<u>Prop</u>	oser's Information:				
()Pri	incipal ()Management ()Super	visior ()Educat	ionist ()Stud	lent ()Parent_	
Nam	e of Proposer :				
	·	(8	45	(0)
Desi	gnation :	Contact No. : ("	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(0	<i>)</i>
Scho	ol/Residential Postal Address :				
Emai	I ld :H	low long have y	ou known the	nominee?	
Rate	the nominee by ticking (\checkmark) the appropr	iate boxes			
Sr.	Descriptors	Excellent	V. Good	Good	Remarks
1	Deep knowledge of Vedic Sanskrit				
2	Situational knowledge of shlokas				
3	Content Lesson planning with module designing.				
4	Spirituality in Personality				
5	Observation skills/Classroom/Reports				
6	Mythological knowledge				
7	Performing Art skills related content				
8	Enthusiasm and Vitality				
9	Follow the specialized dress code				
10	Class room management				
11	Research work				
12	Training future teacher				
13	Clarity of thought on diverse issues				
14	Usage of technology for Sanskrit language				
15	Spreading awareness in the society				
16	Ability to engage and inspire the students				

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Describe why you would like to	nominate the Teacher of Sanskrit Pathshala for this Award.	
What are the three main strangt	he of the Toochey of Canalysit Dathahala 2	
what are the three main strengt	hs of the Teacher of Sanskrit Pathshala ?	
Describe two innovative ideas or ma	jor improvement that the Teacher has used and its out come in the Pathshala.	
Note: Attach extra sheets with the labe evidences with certification.	el (Name, category, School), wherever necessary please do attache supportive docum	ents and
	ten opinion about the applicant please sign below	
Sign	Seal	
Designation	Date	