



PHONE: 011-27667280(O), Ext. 1590

**DEPARTMENT OF ADULT CONTINUING
EDUCATION & EXTENSION
UNIVERSITY OF DELHI**

(Bamboo Structure, Faculty of Social Sciences)

Delhi - 110007

Ref: DACEE/2015

head.dacee@gmail.com, jaipd9@gmail.com

**End-of-Month Internship Evaluation Form
(to be completed by the on-site supervisor)**

Date: 2.11.2017.

Student's name: SANJAY KUMAR

Name of firm/Organization: Centre for Environment Education

address: C-40, South Extension Part - 2, New Delhi

Pin 110049

telephone: 011-26262878; 9871182000

email: sharad.gaur@ceeindia.org

On-site supervisor's name: SHARAD GAUR (Programme Director)

Please evaluate the student intern's performance as either Satisfactory or Unsatisfactory by circling the correct one.

SATISFACTORY

UNSATISFACTORY

Comments: Please comment on the student's performance, strong points, weak points, etc. This is particularly important if the evaluation is unsatisfactory.

He has ably assisted CEE's Swachhagraha Project, by coordinating with nearly 10 schools of NCR region, explaining objectives, distributing resource material, and helping in workshops for teacher guidance.

Supervisor's Signature: Sharad Gaur

Date: 2.11.2017.

Please mail: head.dacee@gmail.com

Department of Adult Continuing Education & Extension, University of Delhi

V.K. Dixit
विभागाध्यक्ष/Head
प्रौढ शिक्षा एवं सतत विस्तार विभाग
Department of Adult, Continuing
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दिल्ली विश्वविद्यालय, दिल्ली-110007
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**End-of-Month Internship Evaluation Form
(to be completed by the on-site supervisor)**

Date: 14th October, 2017

Student's name: AASIF MOIZ

Name of firm/Organization: YUVA JOSH FOUNDATION

address: Sant Nagar, A-1 Block, Bengali Colony, Burari, DELHI
Pin : 110084

email: himanshupatra123@gmail.com telephone: 9958026194.

On-site supervisor's name: MR. HIMANSHU KUMAR AND PRAVEEN KUMAR VERMA

Please evaluate the student intern's performance as either Satisfactory or Unsatisfactory by circling the correct one.

☒ SATISFACTORY

☐ UNSATISFACTORY

Comments: Please comment on the student's performance, strong points, weak points, etc. This is particularly important if the evaluation is unsatisfactory.

Supervisor's Signature: Himanshu Kumar, Date: 15th October, 2017Please mail: head.dacee@gmail.com

Department of Adult Continuing Education & Extension, University of Delhi

V.K. Singh
विभागाध्यक्ष/Head
प्रौढ शिक्षा एवं सतत विस्तार विभाग
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PHONE: 011-2764220/01 Ext. 1500

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UNIVERSITY OF DELHI

(Bamboo Structure, Faculty of Social Sciences)

Delhi - 110007

Ref: DACEE/2015

head.dacee@gmail.com, jee2@gmail.com

Mid-Month Internship Evaluation Form
(to be completed by the on-site supervisor)

Date: 16th Oct, '17

Student's name: ANIL KUMAR

Name of firm/Organization: Smile Foundation, Green Park Extension

address: R3, 1st Floor

Green Park Extension Pin 110016

telephone: 011-43123700

email: hr@smilefoundationindia.org

On-site supervisor's name: Jayshali

Please evaluate the student intern's performance as either Satisfactory or Unsatisfactory by circling the correct one.

SATISFACTORY

UNSATISFACTORY

Comments: Please comment on the student's performance, strong points, weak points, etc. This is particularly important if the evaluation is unsatisfactory.

Anil has worked on post-placement follow-up
of different centers, Activities of different
centers in a month and Analysis of
FILE P1 & P2

Supervisor's Signature: [Signature]

Date: 16/10/17

Please mail: head.dacee@gmail.com

Department of Adult Continuing Education & Extension, University of Delhi

v.v. amit

RECEIVED
DEPARTMENT OF ADULT CONTINUING EDUCATION & EXTENSION
UNIVERSITY OF DELHI
16/10/2017
110007



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(Bamboo Structure, Faculty of Social Sciences)

Delhi - 110007

Ref: DACEE/2015

head.dacee@gmail.com, jalpd@gmail.com

End-of-Month Internship Evaluation Form
(to be completed by the on-site supervisor)

Date: 14th October, 2017

Student's name: AASIF MOIZ

Name of firm/Organization: YUVA JOSH FOUNDATION

Address: Sant Nagar, A-1 Block, Bengali Colony, Burari, DELHI
Pin : 110084

email: himanshupatra123@gmail.com telephone: 9958026194.

On-site supervisor's name: MR. HIMANSHU KUMAR AND PRAVEEN KUMAR VERMA

Please evaluate the student intern's performance as either Satisfactory or Unsatisfactory by circling the correct one.

SATISFACTORY

UNSATISFACTORY

Comments: Please comment on the student's performance, strong points, weak points, etc. This is particularly important if the evaluation is unsatisfactory.

Supervisor's Signature: Himanshu Kumar, Date: 15th October, 2017

Please mail: head.dacee@gmail.com

Department of Adult Continuing Education & Extension, University of Delhi

V.K. Singh
विभागाध्यक्ष/Head
प्रौढ शिक्षा एवं सखा विस्तार विभाग
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Proforma for final Report preparation / Presentation

1. Title page: - Briefly Described title, Name of the student along with course and semester
2. Brief Description of what the practicum report is about? (150 Words)/ Abstract
3. Introduction : Nature of Practicum supervising agency, Given opportunities and Assigned duties given by agency
4. Observations taken
5. Specific Activates during practicum experience, Required time frame to complete the project , What techniques and concepts you learned from these observations
6. Discussion after analysis of observations
7. Conclusion
8. Suggestions
9. Attachments

V.K. Dixit
विभागाध्यक्ष/Head
प्रौढ शिक्षा एवं सदा विस्तार विभाग
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Proforma for Field Visit/Community Learning Centre Visit

Name of the Students:

Contact No. and E-Mail ID:

Name of Course:

Year and Semester:

Date: _____

Visit No. _____

Name of Organization Visited: _____

Name of the are visited:

V.K. Singh

विभागाध्यक्ष/Head
प्रौढ़ शिक्षा एवं सश्व विस्तार विभाग
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**Name of the NGO/Community
Learning Centre:**

Type of Population / Target group covered

Activities or discussion done in the Community:

Schedule of for questions (if required may attach)

V.K. Singh
निर्माणाध्यक्ष/Head
श्रीष्ठ शिक्षा एवं शाला विस्तार विभाग
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Comments and Observations

Conclusion:

Follow ups:

Attachment /Enclosures

1.

2.

3.

Signature of Students

Name

Date

Signature of Co-ordinator

Name

Date

V.K. Dixit
विभागाध्यक्ष/Head
श्री ३ शिक्षा एवं सहाय विस्तार विभाग
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Proforma for Organization Profile

Date: _____

Visit No. _____

Name of Organization Visited: _____

Director/Head of Organization _____

History in Brief:

V. K. Arora

विभागाध्यक्ष/Head
प्रौढ शिक्षा एवं सक्ता विस्तार विभाग
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What they do :

Mandate : Vision / Mission

Strategies

Organizational Structure (Governing Council)

V.K. Saxena
विभागाध्यक्ष/Head
प्रौढ शिक्षा एवं सत्या विस्तार विभाग
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Team: _____

Any Recognition or Awards:

1.

2.

Resources:

1. Publication :

2. Newsletter:

3. Audio Visuals (Video Catalogue):

4. Material prepared :

Thrust Area:

Events:

Partners

Small Grants programme:

V.K. Dixit
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University of Delhi, Delhi-110007

Websites: If any

Contact Details: Address/ Location with contact numbers:

Attachments:

Signature of Students

Name

Date

Signature of Co-ordinator

Name

Date

**Countersigned by HOD
DACEE**

V.K. Dixit
विभागाध्यक्ष/Head
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