



Ministry of Education
Government of India

सत्यमेव जयते



Performance Assessment, Review, and
Analysis of Knowledge for Holistic Development

विद्यया ऽ मृतमश्नुते



एन सी ई आर टी
NCERT



HOLISTIC PROGRESS CARD (HPC)

PREPARATORY STAGE



HOLISTIC PROGRESS CARD (HPC)

Preparatory Stage

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HOLISTIC PROGRESS CARD (HPC)

Preparatory Stage

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Holistic Progress Card

HP C

PREPARATORY
STAGE

PART A (1)

Name and Address of the School:

..... Pin Code:

UDISE Code:

Teacher Code:

APAAR ID:

GENERAL INFORMATION

(To be filled by the teacher in consultation with caregiver/parent)

Student Name: _____

Roll No.: _____ Registration No.: _____

Class: Grade 3 Grade 4 Grade 5

Section: _____ Date of Birth: _____

Address: _____

_____ Phone: _____

Mother/Guardian Name: _____

Mother/Guardian Education: _____ Mother/Guardian Occupation: _____

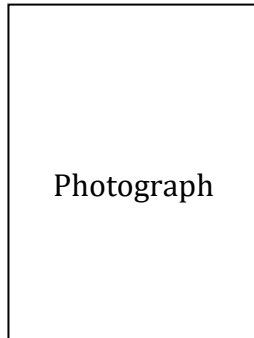
Father/Guardian Name: _____

Father/Guardian Education: _____ Father/Guardian Occupation: _____

Number of siblings: _____ Siblings' age: _____

Mother Tongue: _____ Medium of Instruction: _____

Rural/Urban: _____




ATTENDANCE

MONTHS	APR	MAY	JUNE	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR
No. of Working Days												
No. of Days Attended												
% of Attendance												
If attendance is low then reasons thereof												

PART A (2)


My name is:

I am _____ years old.



My Family

Paste a picture or draw



Things about me...

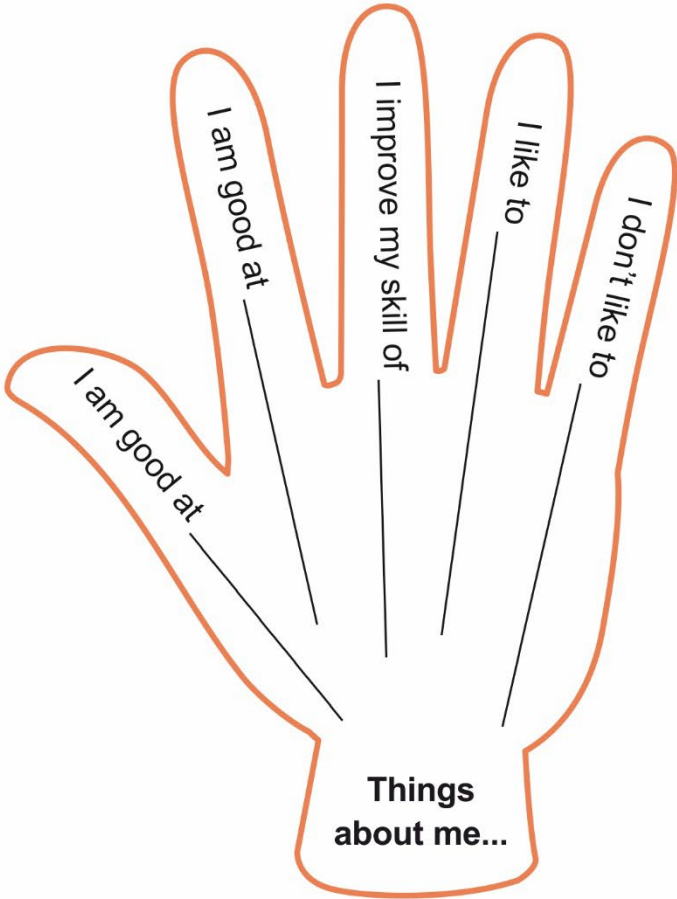
I am good at _____

I improve my skill of _____

I like to _____

I don't like to _____

I am good at _____



Some of my favorite things...

Food:

Games:


Festivals:



When I grow up I want to be...



My Hero! One person who inspires me is...



Three things I want to learn this school year:





























- _____
- _____
- _____



PART A (3)

How do I feel at school?

Circle the most appropriate option for each sentence.

<p>1. I can talk about how I feel, e.g., happy, confident, upset, or angry.</p>				
	Yes	Sometimes	No	Not sure
<p>2. I can calm myself down during difficult situations.</p>				
	Yes	Sometimes	No	Not sure
<p>3. I can understand how my friends feel.</p>				
	Yes	Sometimes	No	Not sure
<p>4. I respect everyone's opinions.</p>				
	Yes	Sometimes	No	Not sure
<p>5. I can help my friends make up after a fight.</p>				
	Yes	Sometimes	No	Not sure
<p>6. When someone is sad, I can make them feel better.</p>				
	Yes	Sometimes	No	Not sure
<p>7. I think I do well at school.</p>				
	Yes	Sometimes	No	Not sure

























Peer Feedback

Peer 1

Circle the most appropriate option for each sentence.

My name: _____

My friend's name: _____

<p>1. My friend can talk about how he/she feels, e.g., happy, confident, upset, or angry.</p>	   
	<p>Yes Sometimes No Not sure</p>
<p>2. My friend can calm himself/herself down during difficult situations.</p>	   
	<p>Yes Sometimes No Not sure</p>
<p>3. My friend can understand how his/her friends feel.</p>	   
	<p>Yes Sometimes No Not sure</p>
<p>4. My friend respects everyone's opinions.</p>	   
	<p>Yes Sometimes No Not sure</p>
<p>5. My friend can help others make up after a fight.</p>	   
	<p>Yes Sometimes No Not sure</p>
<p>6. When someone is sad, my friend can make them feel better.</p>	   
	<p>Yes Sometimes No Not sure</p>

























Peer Feedback

Peer 2

Circle the most appropriate option for each sentence.

My name: _____

My friend's name: _____

<p>1. My friend can talk about how he/she feels, e.g., happy, confident, upset, or angry.</p>	<div style="display: flex; justify-content: space-around; align-items: center;">     </div> <div style="display: flex; justify-content: space-around; align-items: center; background-color: #e67e22; color: white; padding: 5px;"> Yes Sometimes No Not sure </div>
<p>2. My friend can calm himself/herself down during difficult situations.</p>	<div style="display: flex; justify-content: space-around; align-items: center;">     </div> <div style="display: flex; justify-content: space-around; align-items: center; background-color: #e67e22; color: white; padding: 5px;"> Yes Sometimes No Not sure </div>
<p>3. My friend can understand how his/her friends feel.</p>	<div style="display: flex; justify-content: space-around; align-items: center;">     </div> <div style="display: flex; justify-content: space-around; align-items: center; background-color: #e67e22; color: white; padding: 5px;"> Yes Sometimes No Not sure </div>
<p>4. My friend respects everyone's opinions.</p>	<div style="display: flex; justify-content: space-around; align-items: center;">     </div> <div style="display: flex; justify-content: space-around; align-items: center; background-color: #e67e22; color: white; padding: 5px;"> Yes Sometimes No Not sure </div>
<p>5. My friend can help others make up after a fight.</p>	<div style="display: flex; justify-content: space-around; align-items: center;">     </div> <div style="display: flex; justify-content: space-around; align-items: center; background-color: #e67e22; color: white; padding: 5px;"> Yes Sometimes No Not sure </div>
<p>6. When someone is sad, my friend can make them feel better.</p>	<div style="display: flex; justify-content: space-around; align-items: center;">     </div> <div style="display: flex; justify-content: space-around; align-items: center; background-color: #e67e22; color: white; padding: 5px;"> Yes Sometimes No Not sure </div>





















Your Child Matters!

























Tick the resources available to your child at home.

					
Books	Magazines	Toys and Games	Mobile phone	Computer	Internet
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How can I know your child better?

Circle the most appropriate option for each statement.

1. My child finds the classroom and school a welcoming and safe space.				
	Yes	Sometimes	No	Not sure
2. My child participates in academic and co-curricular activities in school.				
	Yes	Sometimes	No	Not sure
3. My child finds the grade-level curriculum difficult.				
	Yes	Sometimes	No	Not sure
4. My child is making good progress as per their grade.				
	Yes	Sometimes	No	Not sure
5. My child is getting the support needed from school.				
	Yes	Sometimes	No	Not sure

<p>6. My child can talk about how he/she feels, e.g., happy, upset, or angry.</p>				
<p>Yes Sometimes No Not sure</p>				
<p>7. My child can calm himself/herself down during difficult situations.</p>				
<p>Yes Sometimes No Not sure</p>				
<p>8. My child can understand how his/her friends feel.</p>				
<p>Yes Sometimes No Not sure</p>				
<p>9. My child respects everyone's opinions.</p>				
<p>Yes Sometimes No Not sure</p>				
<p>10. My child can help his/her friends make up after a fight.</p>				
<p>Yes Sometimes No Not sure</p>				
<p>11. When someone is sad, my child can make them feel better.</p>				
<p>Yes Sometimes No Not sure</p>				

<p>My child needs support with...</p>			
<input type="checkbox"/>	<p>Oral communication (R1 or R2)</p>	<input type="checkbox"/>	<p>Working with other children</p>
<input type="checkbox"/>	<p>Reading</p>	<input type="checkbox"/>	<p>Working independently at home</p>
<input type="checkbox"/>	<p>Numbers and Math</p>	<input type="checkbox"/>	<p>Other subject areas</p>
<input type="checkbox"/>	<p>Self-confidence</p>	<p>Specify: _____</p>	

PART B

Learning Standard: Language Education (R1)					
Curricular Goals <i>(Can choose one or more)</i>	<input type="checkbox"/> L1CG1	<input type="checkbox"/> L1CG2	<input type="checkbox"/> L1CG3	<input type="checkbox"/> L1CG4	<input type="checkbox"/> L1CG5
Competencies <i>(Can choose one or more)</i>	<input type="checkbox"/> L1C1.1	<input type="checkbox"/> L1C1.2	<input type="checkbox"/> L1C1.3	<input type="checkbox"/> L1C2.1	<input type="checkbox"/> L1C2.2
	<input type="checkbox"/> L1C3.1	<input type="checkbox"/> L1C3.2	<input type="checkbox"/> L1C3.3	<input type="checkbox"/> L1C3.4	
	<input type="checkbox"/> L1C4.1	<input type="checkbox"/> L1C4.2	<input type="checkbox"/> L1C5.1	<input type="checkbox"/> L1C5.2	
Activity					
Assessment Questions					

ASSESSMENT RUBRIC*			
Abilities	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

* Please write the assessment rubric for the performance levels of each ability.

Teacher's Feedback

Abilities	Key Performance Level Descriptors		
	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

*Please put a tick mark (✓) to indicate the performance level of each ability.

Observational Notes

























Think about how the learner performed...

What challenges did the learner face?	How did they overcome them? / How did you help them?

Self-Assessment

Please answer the following regarding the activity you just completed.

Colour the emoji for each statement.

I followed my teacher's instructions.	 yes	 no	 not sure
I liked doing this work.	 yes	 no	 not sure
I asked for help if I didn't understand.	 yes	 no	 not sure
I tried my best in this task.	 yes	 no	 not sure
I am proud of my work.	 yes	 no	 not sure
I want to do this task again.	 yes	 no	 not sure
I liked working with my classmate/s.	 yes	 no	 not sure
I could ask my classmates for help, and they helped me.	 yes	 no	 not sure

Learning Standard: Language Education(R2)

Curricular Goals <i>(Can choose one or more)</i>	<input type="checkbox"/> L2CG1 <input type="checkbox"/> L2CG2 <input type="checkbox"/> L2CG3 <input type="checkbox"/> L2CG4
Competencies <i>(Can choose one or more)</i>	<input type="checkbox"/> L2C1.1 <input type="checkbox"/> L2C1.2 <input type="checkbox"/> L2C1.3 <input type="checkbox"/> L2C1.4 <input type="checkbox"/> L2C2.1 <input type="checkbox"/> L2C2.2 <input type="checkbox"/> L2C2.3 <input type="checkbox"/> L2C2.4 <input type="checkbox"/> L2C2.5 <input type="checkbox"/> L2C3.1 <input type="checkbox"/> L2C3.2 <input type="checkbox"/> L2C3.3 <input type="checkbox"/> L2C4.1
Activity	
Assessment Questions	

ASSESSMENT RUBRIC*

Abilities	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

* Please write the assessment rubric for the performance levels of each ability.

Teacher's Feedback

Abilities	Key Performance Level Descriptors		
	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

*Please put a tick mark (✓) to indicate the performance level of each ability.

Observational Notes

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Think about how the learner performed...

What challenges did the learner face?	How did they overcome them? / How did you help them?

Self-Assessment

Please answer the following regarding the activity you just completed.

Colour the emoji for each statement.

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I liked doing this work.	 yes	 no	 not sure
I asked for help if I didn't understand.	 yes	 no	 not sure
I tried my best in this task.	 yes	 no	 not sure
I am proud of my work.	 yes	 no	 not sure
I want to do this task again.	 yes	 no	 not sure
I liked working with my classmate/s.	 yes	 no	 not sure
I could ask my classmates for help, and they helped me.	 yes	 no	 not sure

Learning Standard: Mathematics

Curricular Goals <i>(Can choose one or more)</i>	<input type="checkbox"/> MCG1 <input type="checkbox"/> MCG2 <input type="checkbox"/> MCG3 <input type="checkbox"/> MCG4 <input type="checkbox"/> MCG5
Competencies <i>(Can choose one or more)</i>	<input type="checkbox"/> MC1.1 <input type="checkbox"/> MC1.2 <input type="checkbox"/> MC1.3 <input type="checkbox"/> MC1.4 <input type="checkbox"/> MC2.1 <input type="checkbox"/> MC2.2 <input type="checkbox"/> MC2.3 <input type="checkbox"/> MC2.4 <input type="checkbox"/> MC3.1 <input type="checkbox"/> MC3.2 <input type="checkbox"/> MC3.3 <input type="checkbox"/> MC3.4 <input type="checkbox"/> MC3.5 <input type="checkbox"/> MC3.6 <input type="checkbox"/> MC3.7 <input type="checkbox"/> MC4.1 <input type="checkbox"/> MC4.2 <input type="checkbox"/> MC4.3 <input type="checkbox"/> MC5.1
Activity	
Assessment Questions	

ASSESSMENT RUBRIC*

Abilities	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

* Please write the assessment rubric for the performance levels of each ability.

Teacher's Feedback

Abilities	Key Performance Level Descriptors		
	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

*Please put a tick mark (✓) to indicate the performance level of each ability.

Observational Notes

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Think about how the learner performed...

What challenges did the learner face?	How did they overcome them? / How did you help them?

Self-Assessment

Please answer the following regarding the activity you just completed.

Colour the emoji for each statement.

I followed my teacher's instructions.	 yes	 no	 not sure
I liked doing this work.	 yes	 no	 not sure
I asked for help if I didn't understand.	 yes	 no	 not sure
I tried my best in this task.	 yes	 no	 not sure
I am proud of my work.	 yes	 no	 not sure
I want to do this task again.	 yes	 no	 not sure
I liked working with my classmate/s.	 yes	 no	 not sure
I could ask my classmates for help, and they helped me.	 yes	 no	 not sure

Learning Standard: The World Around Us

Curricular Goals <i>(Can choose one or more)</i>	<input type="checkbox"/> TWCG1 <input type="checkbox"/> TWCG2 <input type="checkbox"/> TWCG3 <input type="checkbox"/> TWCG4 <input type="checkbox"/> TWCG5 <input type="checkbox"/> TWCG6 <input type="checkbox"/> TWCG7
Competencies <i>(Can choose one or more)</i>	<input type="checkbox"/> TWC1.1 <input type="checkbox"/> TWC1.2 <input type="checkbox"/> TWC1.3 <input type="checkbox"/> TWC1.4 <input type="checkbox"/> TWC1.5 <input type="checkbox"/> TWC2.1 <input type="checkbox"/> TWC2.2 <input type="checkbox"/> TWC2.3 <input type="checkbox"/> TWC3.1 <input type="checkbox"/> TWC3.2 <input type="checkbox"/> TWC3.3 <input type="checkbox"/> TWC4.1 <input type="checkbox"/> TWC4.2 <input type="checkbox"/> TWC4.3 <input type="checkbox"/> TWC4.4 <input type="checkbox"/> TWC4.5 <input type="checkbox"/> TWC4.6 <input type="checkbox"/> TWC4.7 <input type="checkbox"/> TWC5.1 <input type="checkbox"/> TWC5.2 <input type="checkbox"/> TWC5.3 <input type="checkbox"/> TWC6.1 <input type="checkbox"/> TWC6.2 <input type="checkbox"/> TWC7.1 <input type="checkbox"/> TWC7.2
Activity	
Assessment Questions	

ASSESSMENT RUBRIC*

Abilities	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

* Please write the assessment rubric for the performance levels of each ability.

Teacher's Feedback

Abilities	Key Performance Level Descriptors		
	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

*Please put a tick mark (✓) to indicate the performance level of each ability.

Observational Notes

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





Think about how the learner performed...

What challenges did the learner face?	How did they overcome them? / How did you help them?

Self-Assessment

Please answer the following regarding the activity you just completed.

Colour the emoji for each statement.

I followed my teacher's instructions.	 yes	 no	 not sure
I liked doing this work.	 yes	 no	 not sure
I asked for help if I didn't understand.	 yes	 no	 not sure
I tried my best in this task.	 yes	 no	 not sure
I am proud of my work.	 yes	 no	 not sure
I want to do this task again.	 yes	 no	 not sure
I liked working with my classmate/s.	 yes	 no	 not sure
I could ask my classmates for help, and they helped me.	 yes	 no	 not sure

Learning Standard: Art Education (AE)

Visual Arts (VA)/ Theatre (T)/ Music (MU)/ Dance and Movement (DM)

Curricular Goals <i>(Can choose one or more)</i>	<input type="checkbox"/> VACG1 <input type="checkbox"/> VACG2 <input type="checkbox"/> VACG3 <input type="checkbox"/> VACG4 <input type="checkbox"/> AECG1 <input type="checkbox"/> TCG1 <input type="checkbox"/> TCG2 <input type="checkbox"/> TCG3 <input type="checkbox"/> TCG4 <input type="checkbox"/> AECG1 <input type="checkbox"/> MUCG1 <input type="checkbox"/> MUCG2 <input type="checkbox"/> MUCG3 <input type="checkbox"/> MUCG4 <input type="checkbox"/> AECG1 <input type="checkbox"/> DMCG1 <input type="checkbox"/> DMCG2 <input type="checkbox"/> DMCG3 <input type="checkbox"/> DMCG4 <input type="checkbox"/> AECG1
Competencies <i>(Can choose one or more)</i>	<input type="checkbox"/> VAC1.1 <input type="checkbox"/> VAC1.2 <input type="checkbox"/> VAC2.1 <input type="checkbox"/> VAC2.2 <input type="checkbox"/> VAC3.1 <input type="checkbox"/> VAC3.2 <input type="checkbox"/> VAC4.1 <input type="checkbox"/> VAC4.2 <input type="checkbox"/> AEC1.1 <input type="checkbox"/> AEC1.2 <input type="checkbox"/> AEC1.3 <input type="checkbox"/> TC1.1 <input type="checkbox"/> TC1.2 <input type="checkbox"/> TC2.1 <input type="checkbox"/> TC2.2 <input type="checkbox"/> TC3.1 <input type="checkbox"/> TC3.2 <input type="checkbox"/> TC4.1 <input type="checkbox"/> TC4.2 <input type="checkbox"/> AEC1.1 <input type="checkbox"/> AEC1.2 <input type="checkbox"/> AEC1.3 <input type="checkbox"/> MUC1.1 <input type="checkbox"/> MUC1.2 <input type="checkbox"/> MUC2.1 <input type="checkbox"/> MUC2.2 <input type="checkbox"/> MUC3.1 <input type="checkbox"/> MUC3.2 <input type="checkbox"/> MUC4.1 <input type="checkbox"/> MUC4.2 <input type="checkbox"/> AEC1.1 <input type="checkbox"/> AEC1.2 <input type="checkbox"/> AEC1.3 <input type="checkbox"/> DMC1.1 <input type="checkbox"/> DMC1.2 <input type="checkbox"/> DMC2.1 <input type="checkbox"/> DMC2.2 <input type="checkbox"/> DMC3.1 <input type="checkbox"/> DMC3.2 <input type="checkbox"/> DMC4.1 <input type="checkbox"/> DMC4.2 <input type="checkbox"/> AEC1.1 <input type="checkbox"/> AEC1.2 <input type="checkbox"/> AEC1.3
Activity	
Assessment Questions	

ASSESSMENT RUBRIC*

Abilities	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

* Please write the assessment rubric for the performance levels of each ability.

Teacher's Feedback

Abilities	Key Performance Level Descriptors		
	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

*Please put a tick mark (✓) to indicate the performance level of each ability.

Observational Notes

























Think about how the learner performed...

What challenges did the learner face?	How did they overcome them? / How did you help them?

Self-Assessment

Please answer the following regarding the activity you just completed.

Colour the emoji for each statement.

I followed my teacher's instructions.	 yes	 no	 not sure
I liked doing this work.	 yes	 no	 not sure
I asked for help if I didn't understand.	 yes	 no	 not sure
I tried my best in this task.	 yes	 no	 not sure
I am proud of my work.	 yes	 no	 not sure
I want to do this task again.	 yes	 no	 not sure
I liked working with my classmate/s.	 yes	 no	 not sure
I could ask my classmates for help, and they helped me.	 yes	 no	 not sure

Learning Standard 1 & 2 : Physical Education

Curricular Goals <i>(Can choose one or more)</i>	Learning Standard1 <input type="checkbox"/> P1CG1 <input type="checkbox"/> P1CG2 <input type="checkbox"/> P1CG3 <input type="checkbox"/> P1CG4 Learning Standard2 <input type="checkbox"/> P2CG1 <input type="checkbox"/> P2CG2 <input type="checkbox"/> P2CG3
Competencies <i>(Can choose one or more)</i>	LS1 <input type="checkbox"/> P1C1.1 <input type="checkbox"/> P1C1.2 <input type="checkbox"/> P1C1.3 <input type="checkbox"/> P1C1.4 <input type="checkbox"/> P1C2.1 <input type="checkbox"/> P1C2.2 <input type="checkbox"/> P1C2.3 <input type="checkbox"/> P1C2.4 <input type="checkbox"/> P1C2.5 <input type="checkbox"/> P1C3.1 <input type="checkbox"/> P1C3.2 <input type="checkbox"/> P1C4.1 LS1 <input type="checkbox"/> P2C1.1 <input type="checkbox"/> P1C1.2 <input type="checkbox"/> P1C1.3 <input type="checkbox"/> P2C2.1 <input type="checkbox"/> P2C2.2 <input type="checkbox"/> P2C2.3 <input type="checkbox"/> P2C2.4 <input type="checkbox"/> P2C2.5 <input type="checkbox"/> P2C3.1 <input type="checkbox"/> P2C3.2
Activity	
Assessment Questions	

ASSESSMENT RUBRIC*

Abilities	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

* Please write the assessment rubric for the performance levels of each ability.

Teacher's Feedback

Abilities	Key Performance Level Descriptors		
	Beginner	Proficient	Advanced
Awareness			
Sensitivity			
Creativity			

*Please put a tick mark (✓) to indicate the performance level of each ability.

Observational Notes

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Think about how the learner performed...

What challenges did the learner face?	How did they overcome them? / How did you help them?

Self-Assessment

Please answer the following regarding the activity you just completed.




Colour the emoji for each statement.




I followed my teacher's instructions.	 yes	 no	 not sure
I liked doing this work.	 yes	 no	 not sure
I asked for help if I didn't understand.	 yes	 no	 not sure
I tried my best in this task.	 yes	 no	 not sure
I am proud of my work.	 yes	 no	 not sure
I want to do this task again.	 yes	 no	 not sure
I liked working with my classmate/s.	 yes	 no	 not sure
I could ask my classmates for help, and they helped me.	 yes	 no	 not sure




PART C




SUMMARY FOR THE ACADEMIC YEAR




Tick the appropriate performance level descriptor and write an observational note for each category based on performance throughout the academic year.




		Performance Level Descriptors		
		 BEGINNER	 PROFICIENT	 ADVANCED
Language (R1)				
ABILITIES	Awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sensitivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr style="border: 0.5px solid #ccc;"/> <hr style="border: 0.5px solid #ccc;"/> <hr style="border: 0.5px solid #ccc;"/>				

		Performance Level Descriptors		
		 BEGINNER	 PROFICIENT	 ADVANCED
Language (R2)				
ABILITIES	Awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sensitivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr style="border: 0.5px solid #ccc;"/> <hr style="border: 0.5px solid #ccc;"/> <hr style="border: 0.5px solid #ccc;"/>				

		Performance Level Descriptors		
		 BEGINNER	 PROFICIENT	 ADVANCED
Mathematics				
ABILITIES	Awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sensitivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr style="border: 0.5px solid #ccc;"/> <hr style="border: 0.5px solid #ccc;"/> <hr style="border: 0.5px solid #ccc;"/>				

The World Around Us		Performance Level Descriptors		
		 BEGINNER	 PROFICIENT	 ADVANCED
ABILITIES	Awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sensitivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/> <hr/>				

Art Education		Performance Level Descriptors		
		 BEGINNER	 PROFICIENT	 ADVANCED
ABILITIES	Awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sensitivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/> <hr/>				

Physical Education		Performance Level Descriptors		
		 BEGINNER	 PROFICIENT	 ADVANCED
ABILITIES	Awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sensitivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/> <hr/>				

Core Team

Ministry of Education

Sh. Sanjay Kumar, Secretary, Department of School Education and Literacy (DoSEL), Ministry of Education (MoE)
Sh. Vipin Kumar, Additional Secretary, DoSEL, MoE
Sh. Anandrao V. Patil, Additional Secretary, DoSEL, MoE
Ms. Archana Sharma Awasthi, Joint Secretary, DoSEL, MoE
Ms. Amarpreet Duggal, Joint Secretary, DoSEL, MoE
Ms. Prachi Pandey, Joint Secretary, DoSEL, MoE
Ms. A. Srijia, Economic Advisor, DoSEL, MoE
Sh. Sunil Sharma, Director, DoSEL, MoE
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National Council for Educational Research and Training (NCERT)

Prof. (Dr.) Dinesh Prasad Saklani, Director, NCERT
Prof. (Dr.) Sridhar Srivastava, Joint Director, NCERT
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Prof. (Dr.) Suniti Sanwal, HoD, DEE, NCERT
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Central Board of Secondary Education (CBSE)

Smt. Nidhi Chibber, Chairperson
Dr. Joseph Emmanuel, Director (Academics)
Dr. Praggya M. Singh, Director (Academics-Assessment)
Dr. Sweta Singh, Joint Secretary (Academics)

Kendriya Vidyalaya Sangathan (KVS)

Ms. Nidhi Pandey, IIS, Commissioner
Shri N.R. Murali, Joint Commissioner

Navodaya Vidyalaya Samiti (NVS)

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Shri Gyanendra Kumar, Assistant Commissioner

Other Institutes/Organizations

SCERT/SIEs, Samagra Shiksha, All States/UTs of India
UNICEF

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