





# VEDA VYASA D.A.V. PUBLIC SCHOOL

Vikas Puri, New Delhi 110018

## Mentor's Observation (Suggestive)

Attendance: \_\_\_\_\_

Involvement: \_\_\_\_\_

Regularity: \_\_\_\_\_

Commitment: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The activity/project was (circle appropriate response):

Satisfactorily completed

Not Satisfactorily completed

\_\_\_\_\_

\_\_\_\_\_

Activity/Project Mentor's signature

Name

Seal of school



## VEDA VYASA D.A.V. PUBLIC SCHOOL

Vikas Puri, New Delhi 110018

### SEWA Self Appraisal Form

The following questions should be addressed at the end of each activity/project. These are guiding questions. Candidates can either answer on this form or write a reflective, continuous text incorporating responses to these questions.

My Name \_\_\_\_\_

My Activity / Project \_\_\_\_\_

My Commitment Towards the Project/ Activity

---

---

This Activity/ Project has been a great learning experience because

---

---

I initially felt that the project could not have achieved its outcomes because

---

---

The project has definitely changed me as a person in terms of behaviour, attitude and life skills because

---

---

The details of beneficiary(ies). Any significant comment received from them; please quote

---

---

The challenges I faced and the things I might do differently next time so as to improve?

---

---



**VEDA VYASA D.A.V. PUBLIC SCHOOL**

Vikas Puri, New Delhi 110018

## **My SEWA Promise Form**

Dear Student

SEWA is a firm step to prepare you for your life. It is a voluntary project experience. You have to complete My SEWA Promise Form and obtain prior approval for the activity/project. Selection of a SEWA activity, development, implementation of the proposal and implementation of the activity is the responsibility of each student. Signature of the parent indicates review and approval of this proposal.

Student's Name: \_\_\_\_\_ Class: \_\_\_\_\_

Brief description of the Activity

Duration( Days & time) \_\_\_\_\_ Estimated Hours: \_\_\_\_\_

Name of Mentor Teacher: \_\_\_\_\_

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

### **SEWA Schedule (School Activities)**

I have worked in group 1 \_\_\_\_\_ and group 2 \_\_\_\_\_ under SEWA activities going in my school in 1st and 2nd periods on Wednesday/ 3rd and 4th period on Tuesday as per allotted time table. Various activities/reports are recorded in my SEWA file.