தமிழ்நாடு ஆசிரியா் கல்வியியல் பல்கலைக்கழகம்



TAMIL NADU TEACHERS EDUCATION UNIVERSITY

(Established under Tamil Nadu Act 33 of 2008) GangaiammanKoil Street, Karapakkam, Chennai - 600 097.

Website: www.tnteu.ac.in

No. TNTEU/DoF/LS/Off.Comm/005

Date: 16.04.2019

Dr.M.Govindan, PhD Dean of Faculty

Circular

This is to inform you that One day Programme on Yoga and Physical Fitness is going to be conducted by the Department of Educational Psychology for the M.Ed Students and Ph.D Scholars on 16th April 2019, 10am to 12pm. Dr. A.John Lawrence, Associate Professor, St.Xavier's College of Education (Autonomous), Palayamkottai will be the Resource Person for this programme. All the students and research scholars are asked to attend the programme without fail

DEAN OF FACULTY

Dr. M. GOVINC. Actions

Dean of Facour.

Professor and He.

Department of Educations

Tamil Nadu Teachers Education

Karapakkam, Chennal - 5

TAMIL NADU TEACHER EDUCATION UNIVERSITY Chennai-97

DATE:16/04/2019



TIME: 10am to 1pm

YOGA AND PHYSICAL FITNESS

Resource Person



Dr.A.John Lawrence Associate Professor St.Xavier's College Of Education (Autonomous) Palayamkottai-627 022

Tamil Nadu Teachers Education University

Chennai-97



Topic	: Yoga and Physical Fitness
Date	:16.04.2019
Time	:10.00 am to 12.00 pm
Resource Person	: Dr. A.John Lawrence, Associate Professor St.Xavier's College of Education(Autonomous), Palayamkottai.
Participants	: M.Ed, M.Phil, Ph.D

Dr. A. John Lawrence has motivated the participants towards the topic by brainstorming. Dr. A. John Lawrence has discussed about the various components of Yoga and Physical Fitness. In his lecture Resource Person explained in detail about the relationship between Yoga and Physical Fitness. The Resource Person has answered all the questions raised by the participants. Those one day programme went on well with the active disclose and deliberation of the Resource Person. The programme organizers have collected the feedback from the participants.

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Dr. W. GOVINDAN, Ph.D Professor & Head Department of Educational Psychology Tamilnadu Teachers Education University Karapakkam, Chennal-600 097.

REPORT

A ONE DAY PROGRAMME ON YOGA AND PHYSICAL FITNESS – 16.04.2019,

10am to 1pm

A One day Programme on Yoga and Physical Fitness was conducted by the Department of Educational Psychology, Tamil Nadu Teachers Education University, Chennai on 16.04.2019, 10am to 1pm, in order to develop the knowledge of Yoga and Physical Fitness for the M.Phil students and Ph.D Scholars. Dr. A.John Lawrence, Associate Professor, St.Xavier's College of Education (Autonomous), Palayamkottai was the Resource Person. The resource person has given the detailed seminar on the topic to the participants. He has discussed about the various components on Vocational Guidance. The Resource Person has answered all the questions raised by the participants. The programme organizers have collected the feedback from the participants. A total of 20 M.Ed Students and Ph.D Scholars from the Tamil Nadu Teachers Education University, Chennai were Participated in the programme.

M'Ghinden 16'4'249 DEAN OF FACULTY

Dr. M. GOVINDAN, Ph.D.,
Dean of Faculty
Professor and Head
Department of Educational Psychology
Tamil Nadu Teachers Education University
Karapakkam, Chennai • 97.

A ONE DAY PROGRAMME ON YOGA AND PHYSICAL FITNESS- 16.04.2019







தமிழ்நாடு ஆசிரியர் கல்வியியல் பல்கலைக்கழகம் TAMILNADU TEACHERS EDUCATION UNIVERSITY

ATTENDANCE SHEET

S.NO	NAME	PROGRAMME
1	R.Kavitha Ceceli	Med
2	V.Sankar	Ph.D
3	R.Piramilagandhi	Ph.D
4	Sahana Sayyad	Ph.D
5	B.Princy	Med
6	R.Ganesan	Ph.D
7	S.Dhamodharan	Ph.D
8	K.Muruganantham	Ph.D
9	G.Thirumal	M.Ed
10	P.Sivakumar	Ph.D
11	N.Iyyappan	Ph.D
12	S.Ragavagiri	Ph.D
13	S.Santhanarajam	Ph.D
14	T.Vivekanandan	Ph.D
15	S.Sheeba	M.Ed
16	P.Devi	M.Ed
17	M.Renugadevi	M.Ed
18	P.Kanimozhi	Med
19	S.Sophia	M.Ed
20	J.T.Augustin Jebakumar	M.Ed

DEAN OF FACULTY

Dr. M. GOVINDAN, Ph.D.,
Dean of Faculty
Professor and Head
Department of Educational Psychology
Tamii Madu Teachers Education University
Karapakkam, Chennai - 97.

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

. R. KAVITHA CECELI

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: yoga and physical fitness

Name of the Resource Person

: Dr. A. John Lawrence

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	V		-
2	Preparation of the topic		~	
3	Presentation of the subject	~		
4	Clarity in presentation		V	
5	Usefulness of the programme			~

Any Suggestion for Updation

: Very good

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: V. Sankar

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: Yoga and physical Fitness : Dr.A. John Lawrence

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	/		
2	Preparation of the topic		V	
3	Presentation of the subject			V
4	Clarity in presentation			
5	Usefulness of the programme			

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: SAHANA SAYYAD.

Course of Study

Title of the Programme

: YOGIA AND PHYSICAL FITNESS.

Name of the Resource Person

: Dr.A. JOHN LAWRENCE.

Kindly tick the relevant box as your suggestion

S No	ltem	Excellent	Good	Fair
1	Relevancy of the topic	1/		
2	Preparation of the topic			
3	Presentation of the subject			
4	Clarity in presentation		1	
5	Usefulness of the programme			

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

·B. Princy

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: Yoga and Physical Fithess : Dr. A. John Lawrence

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	1		
2	Preparation of the topic		1/	
3	Presentation of the subject			1/
4	Clarity in presentation	1		
5	Usefulness of the programme		1 -	

Any Suggestion for Updation

Signature of the participant

B. Pormay.

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: GIANESAN·R

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: YOUR AND PHYSICAL FITNESS

Name of the Resource Person

: Dr. A. JOHN LOWRANCE

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	1		
2	Preparation of the topic		V	
3	Presentation of the subject		V	
4	Clarity in presentation	8		V
5	Usefulness of the programme			V

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name	of the	Partic	ipant

: Dr. S. Dhamodharan

Course of Study

Title of the Programme

: M.Ed/M.Phil/Ph.D : yega and physical Fitness : Dr. A. John lawrance

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic			
2	Preparation of the topic		1	
3	Presentation of the subject		/	
4	Clarity in presentation		*	1
5	Usefulness of the programme			

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: MURU GANAKITETATALE.

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: YOBA AND DHYSICAL FITHESS.

Name of the Resource Person

: Dr. A. JOHN LAWRENCE.

Kindly tick the relevant box as your suggestion

S No	ltem	Excellent	Good	Fair
1	Relevancy of the topic	/		
2	Preparation of the topic			
3	Presentation of the subject			
4	Clarity in presentation			
5	Usefulness of the programme			

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

		Da at at a a a a
Name	or the	Participant

: Thomas. G.

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: Yoge and Physical Fitness. : Do. A. Tohn Convenue.

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic			
2	Preparation of the topic			
3	Presentation of the subject		~	
4	Clarity in presentation		~	
5	Usefulness of the programme			

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name	of the	Participant

: P. GIVAKUMAR

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

Name of the Resource Person

: Do- A- John Lawrance

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	1		
2	Preparation of the topic		1	
3	Presentation of the subject			
4	Clarity in presentation			
5	Usefulness of the programme			

Any Suggestion for Updation

D. Siva kum Signature of the participant

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

		D	
Name	or the	Partici	pant

: N. IYAPPAN

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: Yoga and physical fitness : mr. A. M. Dr. A. John Lawrence

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	,	V	
2	Preparation of the topic			V
3	Presentation of the subject	V		
4	Clarity in presentation		V	
5	Usefulness of the programme			V

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

:S.RAGAVAGIRI

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: YOGIA AND PHYSICAL FITNESS :Dr.A. John Lawrence

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	ltem	Excellent	Good	Fair
1	Relevancy of the topic		V	
2	Preparation of the topic	V		
3	Presentation of the subject			V
4	Clarity in presentation		V	
5	Usefulness of the programme			V

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: S. San Itena Rijan

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: Yoga and physical Fitness

Name of the Resource Person : Dr. A . John law rence

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	~		
2	Preparation of the topic		~	
3	Presentation of the subject			~
4	Clarity in presentation	~		
5	Usefulness of the programme		~	

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: T. VIVEKANANDAN

Course of Study

Title of the Programme

: M.Ed/M.Phil/Ph.D : Yoga and physical Fitness : Dr.A. John Lawrence

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic		7	
2	Preparation of the topic	-		
3	Presentation of the subject			-
4	Clarity in presentation	~		
5	Usefulness of the programme		-	

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

2/200000000		
Name	of the	Participant

: S. SHEEBA

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: Yoga and physical fitness : Dr. A. Joun Lawrence

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic			
2	Preparation of the topic		V	
3	Presentation of the subject			1
4	Clarity in presentation		V	
5	Usefulness of the programme	/		

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: P. DFVI

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: yoga and physical Fitzness : Dr. A. John Lawrence

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	7		
2	Preparation of the topic		7	
3	Presentation of the subject	7		
4	Clarity in presentation		7	
5	Usefulness of the programme			7

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: M. RENUCTA DEVI

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

:YOGA AND PHYSICAL SITNESS :Dr. A. JOHN LAWRENCE

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	2		
2	Preparation of the topic			
3	Presentation of the subject			
4	Clarity in presentation			1
5	Usefulness of the programme			

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: P. KANIMOZHI

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: YOGA AND PHYSICAL FITNESS

Name of the Resource Person

: Dr.A. JOHN LAWRENCE

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic			
2	Preparation of the topic		~	
3	Presentation of the subject			V
4	Clarity in presentation			
5	Usefulness of the programme			

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name of the Participant

: B. Sophia

Course of Study

: M.Ed / M.Phil/ Ph.D

Title of the Programme

: yoga and physical Fitness

Name of the Resource Person

: Dr. A. John Lawrence

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topic	V		
2	Preparation of the topic		~	
3	Presentation of the subject			1
4	Clarity in presentation		1	
5	Usefulness of the programme	V		

Any Suggestion for Updation

Date: 16/04/2019

Chennai -97

Time: 10am to 12pm

Yoga and Physical Fitness

FEEDBACK FORM

Name	of the	Partic	inant
Maille	OI LIN	. raiti	June

Course of Study

Title of the Programme

: T. T Augustin Jebaramen : M.Ed/M.Phil/Ph.D : Yoga and Physical Febress : Dr. A. John Laurence

Name of the Resource Person

Kindly tick the relevant box as your suggestion

S No	Item	Excellent	Good	Fair
1	Relevancy of the topid		V	
2	Preparation of the topic	M		
3	Presentation of the subject		M	
4	Clarity in presentation			h
5	Usefulness of the programme			

Any Suggestion for Updation

: very good