**Course Plan Format**  FF No. 182

Academic Year : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Branch : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester : \_\_\_\_\_\_\_\_\_\_\_

Subject Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subject Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| **Unit No.** | **Topic** | **Method** | **Media** | **Student Activity** | **Assessment Tool** | **Remarks** |
| I |  |  |  | #  § | i) Test I ◘  ii) HA 1 ■  iii) □  iv) ○ | Test I out of 30 marks, to be converted to \_\_\_ marks |
| II |  |  |  | #  § | i) MCQ based Test II ◘  ii) HA 2 ■  iii) □  iv) ○ | Test II out of 20 marks, to be converted to 20 marks |
| III |  |  |  | #  § | i) MCQ based Test II ◘  ii) HA 3 ■  iii) □  iv) ○ |
| IV |  |  |  | #  § | i) HA 4 ■  ii) □  iii) ○ |  |
| V |  |  |  | #  § | i) HA 5 ■  ii) □  iii) ○ |  |

Levels of Bloom’s Taxonomy applicable for the course – Knowledge / Comprehension / Application / Analysis / Synthesis / Evaluation (Strike out levels not applicable)

List of Reference Books and Text Books -

1.

2.

3.

# - Details of laboratory course student activity for experiments based on appropriate unit.

§ - Details of Tutorial course student activity based on appropriate unit.

◘ - Mandatory Assessment activities as per structure.

Mode of conduct of class test is to be mentioned.

■ - Scope of HA should be written in brief.

□ - Write unit-wise parameters used for continuous assessment of laboratory course.

If parameters are used as a whole, they may be described in footer.

○ - Write unit-wise parameters used for continuous assessment of tut. course.

Name and Signature of Faculty executing the course plan

1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature of Chairman – BOS Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_