MINISTRY OF GENERAL EDUCATION, CENTRAL PROVINCE
INDIVIDUAL WORK PLAN

NAME OF JOB HOLDER: _____. **WORK PLAN PERIOD**: JANUARY to DECEMBER 2019.

JOB TITLE: CLASS TEACHER**.** **T.S No : _____**
DEPARTMENT : EDUCATION

JOB PURPOSE: To Teach Effectively In Order To Impart Relevant Knowledge, Skills, Values And Attitudes To Learners.

KEY RESULT AREA	PRINCIPAL ACCOUNTABILITY	TARGETS	SCHEDULE OF ACTIVITIES
LESSON PLANNING	-To plan appropriate teaching and learning activities -To organize teaching and learning materials that will ensure smooth delivery of knowledge, skills, attitudes and values to learners.	-To prepare___ schemes of work for my classes for whole year -2019 (grade__). -prepare ___ weekly forecasts for my classes for whole year -2019 (grade __). - prepare ____ lesson plans for my classes for whole year -2019 (grade__).	-To prepare the following; .schemes of wok in all once in a term .weekly forecasts every week for a term .lesson plans daily in a term .and organize teaching and learning materials in advance.
TEACHING	-To teach, effectively in order to ensure relevant knowledge, skills, values and attitudes are imparted in learners.	-To teach my class daily in all the study areas and organize teaching and learning materials in advance.	-To teach all study areas to all learners -to choose suitable methods of teaching and also organize suitable teaching and

			learning materials daily.
CLASS MANAGEMENT	-To supervise and control all class activities in order to provide peaceful and conducive teaching and learning environment for all learners.	-To help learners choose their class representatives termly, mark class attendance register daily and give relevant guidance every time.	-Help learners choose their class representatives -mark class attendance register -supervise and control all class activities.
ASSESSMENT	-To assess all learners' performance regularly and also to check teachers' strengths and weaknesses so that an alternative measure can be employed.	-To assess all learners daily, weekly, monthly and termly and also keep record of work where need be.	-Assess all learners -to keep record of work

JOB HOLDER'S NAME:_____.
SIGNATURE:_____**DATE**:_____

SUPERVISOR'S NAME:_____ **SIGNATURE:**_____
DATE:_____

COUNTER SIGNING OFFICER'S NAME:_____ **SIGNATURE:**_____
DATE:_____