



Student Name: \_\_\_\_\_

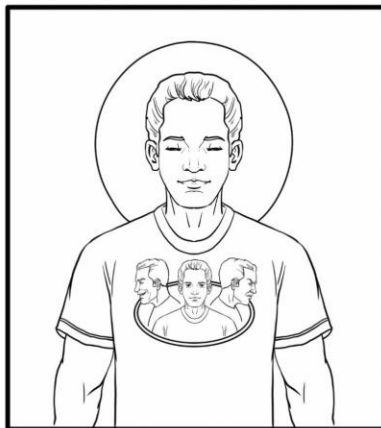
Date of birth: \_\_\_\_\_ Class and Section \_\_\_\_\_

School name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Pin/Zip: \_\_\_\_\_

Fill colours to the following graphic illustrations. Transliterate shlokas of this lesson on the other side of this page. Make an oral presentation of shlokas and a brief summary of their meaning either individually or in small groups.



### Project Assessment

#### Shloka Writing

① ② ③ ④ ⑤

#### Shloka Recitation

① ② ③ ④ ⑤

#### Shloka Summary

① ② ③ ④ ⑤

#### Graphic Illustration

① ② ③ ④ ⑤

#### Aggregate Grade

① ② ③ ④ ⑤

Examiner Signature

Date: \_\_\_\_\_

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