國立臺北教育大學___學年度第___學期

教學改善計畫

National Taipei University of Education - Teaching Improvement Plan

填表日期 Filling date:_____

所屬系所 Department or institution		教師姓名 Name		
課程名稱 Course name				
教學相關資訊 Information related to teaching: (請說明課程目標、單元內容、教學技巧等資訊) (申請教師填具)(空格不足時,請自行增列) (Please specify course objectives, unit content, teaching skills and other information.) (Filled by the applying teacher) (If the space is insufficient, please increase it on your own.)				
教學成果自評 Self-evaluation of teaching results: (請自評教學成果,如是否依照課綱達教學目標、與學生之上課互動之情形等等) (申請教師填具)(空格不足時,請自行增列) (Please make self-evaluation on teaching results. For example, evaluate whether you follow the teaching objectives of the course outline, and your interaction with students during the class, etc.) (Filled by the applying teacher) (If the space is insufficient, please increase it on your own.)				
對學生教學評鑑分數與開放意見的回應 Response to student's teaching evaluation scores and open opinion: (請反饋對學生教學評鑑分數的回應,陳述學生資訊是否有偏頗之虞) (申請教師填具)(空格不足時,請自行增列) (Please give feedback on student's teaching evaluation scores, and state whether his or her information is biased.) (Filled by the applying teacher) (If the space is insufficient, please increase it on your own.)				

預計改善計畫 Estimated improvement plan:				
(請研擬針對課程之改善計畫,如教學方法之改變,教	學協助等)			
(申請教師填具)(空格不足時,請自行增列)				
(Please draft the improvement plan for the course, such as	changes in teaching methods, teaching assistance, etc.)			
(Filled by the applying teacher) (If the space is insufficient.				
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單位主管輔導意見 Guidance opinion of the he	ad of the unit :			
(單位主管對老師之評價)				
(單位主管填具)(空格不足時,請自行增列)				
(Evaluation of the director of the unit on the teacher.)				
(Filled by the director of the unit) (If the space is insufficient, please increase it on your own.)				
單位主管輔導計畫 Guidance plan of the head of the unit:				
(單位主管如何協助老師、教學協助之機制等)				
(單位主管填具)(空格不足時,請自行增列)				
(How the director of the unit helps the teacher, and the mechanism of teaching assistance, etc.)				
(Filled by the director of the unit) (If the space is insufficient, please increase it on your own.)				
山洼业红灰力。	昭山十 竺 ダ力。			
申請教師簽名 Signature of the applying teacher:	單位主管簽名 Signature of the director of the unit:			
	(請系主任蓋章後, 密件交回教發中心) (After the			
	department chair seals it, send this classified material to the			
	Center for Teaching and Learning Development.)			