

APPENDIX B  
INFORMATION INVENTORY

K.N.Patel  
(M.Sc., M.Ed.)  
Extension Education Institute,  
Institute of Agriculture,  
Anand. (Dist.Kaira), W.Rly.  
(Gujarat State)

Date:

To  
The Principal,

Respected Sir,

You are kindly requested to go through the following few lines and oblige.

I am on the staff of the Extension Education Institute, (Audio-Visual Aids Specialist) Anand, presently studying for the Doctorate Degree in Education (Audio-Visual Education) in the Faculty of Education and Psychology, M.S.University of Baroda.

With a view to explore and determine the appropriate research field, I should like to obtain the preliminary informations about Audio-Visual Education Training Programmes in the Secondary Teachers' Training Colleges in India. With this very objective in view, I have developed a special Preliminary Inventory for the purpose of elementary survey in the field.

I should like to request you to kindly extend your valuable co-operation. You may please return the questionnaire duly filled at your earliest in the enclosed self-addressed envelope.

Excuse me for the trouble given.

Thanking you, I am,

Yours faithfully,

Sd/- K.N.Patel

(K.N.Patel)  
Ph.D.Student,

F.W.Rs. through the  
Guiding Professor

Sd/- B.P.Lulla                      Faculty of Education and Psychology,  
Signature of the Professor.      M.S.University of Baroda.  
The Centre for Advanced Study in Education,  
Faculty of Education and Psychology, M.S.University of Baroda, Baroda.

(For only the Principals of the Secondary Teachers' Training Colleges).

You are kindly requested to mention your answer by putting sign (   /   ) in any one of the blanks provided at the end of each of the following five questions.

1. Does your syllabus for Graduate Degree in Education include Audio-Visual Education ? \_\_\_\_\_ Yes \_\_\_\_\_ No.
2. Do you have the specialized staff for Audio-Visual Education ? \_\_\_\_\_ Yes \_\_\_\_\_ No.
3. Do you offer Audio-Visual Education as the special field (Elective subject) to your Graduate Teacher Trainees if demanded by them ? \_\_\_\_\_ Yes \_\_\_\_\_ No.
4. Do you impart general training in Audio-Visual Education? \_\_\_\_\_ Yes \_\_\_\_\_ No.  
(a) If Yes, you may please give the necessary informations in the columns given below.

Sr. No.	Item	Theory	Practical	Total
1.	No. of hours per week			
2.	No. of marks in the Annual Degree Examination.			

5. General remarks if any about the organization of the Audio-Visual Education Training Programme in your College.

Date :

Signature and Designation.

Place :