**แผนการสอนเฉพาะบุคคล**

แบบ วช.8

**(Individual Implementation Plan : IIP)**

ชื่อ – สกุล....................................................................... หน่วยบริการ..................................................................

ประเภทความพิการ.............................................................ภาคเรียนที่.....................ปีการศึกษา..................................

ผู้รับผิดชอบ…………………………………………………….........................................................................................................

ทักษะ................................................................................ เรื่อง.....................................................................................

เป้าหมายระยะยาว 1 ปี..................................................................................................................................................

แผนที่.................เริ่มใช้แผนวันที่...............................................สิ้นสุดแผนวันที่.............................................................

ใช้เวลา........................นาที/ชั่วโมง

**สาระสำคัญ**

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**จุดประสงค์เชิงพฤติกรรม ข้อที่ ..........**

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**กิจกรรมการสอน**

ขั้นนำ

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ขั้นสอน

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ขั้นสรุป

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**เทคนิค/วิธีการสอน**

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**สื่อ/อุปกรณ์/สิ่งอำนวยความสะดวก/บริการ**

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**การวัดและประเมินผล**

วิธีการ..............................................................................................................................................................................

เครื่องมือเกณฑ์การวัดและประเมินผล.............................................................................................................................

เกณฑ์...............................................................................................................................................................................

ลงชื่อ..............*...................*...................ครูผู้รับผิดชอบ

(.................................................)

ตำแหน่ง................................................

**ความเห็นของหัวหน้ากลุ่มบริหารวิชาการ**

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ลงชื่อ..............*...................*...................

(.................................................)

หัวหน้ากลุ่มบริหารวิชาการ หน่วยบริการ เขต ..........

**ความเห็นผู้บริหาร/ผู้ที่ได้รับมอบหมาย**

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ลงชื่อ..............*...................*...................

(.................................................)

หัวหน้าหน่วยบริการ เขต..........

ผู้แทนผู้บริหารสถานศึกษา

**แบบบันทึกผลการจัดการเรียนรู้หลังการสอนตามแผนการสอนเฉพาะบุคคล (IIP)**

**ชื่อ – สกุล** .....................................................................................................................................................................

**จุดประสงค์เชิงพฤติกรรม** ...........................................................................................................................................

**แผนที่** .............. **เรื่อง** ...................................................................................................................................................

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **ครั้งที่/ว.ด.ป.** | **ผลการจัดกิจกรรมการเรียนการสอน**  (พฤติกรรมที่สังเกตได้/ปัญหา/แนวทางการจัดกิจกรรมครั้งต่อไป) | **ผลการเรียนรู้**  **ระดับคุณภาพ** | | | | | **ความเห็นผู้ปกครอง** |
| **5** | **4** | **3** | **2** | **1** |
| .............. | ............................................................................................................................................................................................................................................................................................................................................................................................................................... |  |  |  |  |  | ................................................................................................................................................................................................... |
| .............. | ............................................................................................................................................................................................................................................................................................................................................................................................................................... |  |  |  |  |  | ................................................................................................................................................................................................... |
| .............. | ............................................................................................................................................................................................................................................................................................................................................................................................................................... |  |  |  |  |  | ................................................................................................................................................................................................... |
| .............. | ............................................................................................................................................................................................................................................................................................................................................................................................................................... |  |  |  |  |  | ................................................................................................................................................................................................... |
| .............. | ............................................................................................................................................................................................................................................................................................................................................................................................................................... |  |  |  |  |  | ................................................................................................................................................................................................... |

**สรุปผลการเรียนรู้ของผู้เรียนตามแผนการสอนเฉพาะบุคคล** (IIP)

□ ผ่าน คือ ผู้เรียนสามารถปฏิบัติกิจกรรมตามแผนนั้นได้ในระดับคุณภาพ 4 ขึ้นไป (จำนวน 3 ครั้งขึ้นไป)

□ ไม่ผ่าน คือ ผู้เรียนปฏิบัติกิจกรรมตามแผนนั้นได้ในระดับคุณภาพ ต่ำกว่าระดับ 4

**ระดับคุณภาพ ของผู้เรียน**

5 หมายถึง …………………………………………………………..…………………………………………………………..

4 หมายถึง ………………………………………………………….…………………………………………………………..

3 หมายถึง …………………………………………………………..…………………………………………………………..

2 หมายถึง ………………………………………………………….…………………………………………………………...

1 หมายถึง ………………………………………………………….…………………………………………………………...

ลงชื่อ................................................

(..............................................)

ครูผู้รับผิดชอบ