

FORM No. 6

(See rule 12)

University or College

Confidential Assessment and Self - Assessment Reports of Non-Teaching / Non-Technical / Technical Employees

Serial No..... Year ending 31st March 200

File No.

Name : Shri / Smt / Kumari

Department or Office (including section)

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INSTRUCTIONS

1. Report should be submitted annually and for the period ending 31st March 200
2. Report should be signed in full and dated by the Reporting Officer. His name and designation should be typed or written legible below his signature.
3. Report should as far as possible be written in manuscript. When the report is typed for good and sufficient reasons a certificate to that effect by the Reporting officer should be added to the Report.
4. If the employee has served under the reporting authority for less than six months the officers under whom he has previously served should be consulted and their opinions incorporated in the report, indicating how far the replies to the questions are based on personal knowledge and how far on reports of other officers.
5. Anything specially meritorious or adverse to the employee should be mentioned even if not specifically provided for.
6. Severe notice will be taken of perfunctory, cryptic and incomplete and prejudicial reports.
7. All adverse / outstanding remarks should be communicated to the employee in writing.
8. The reviewing authority has right to ask justification of remarks from the reporting officer.

Personal Information

(To be filled in by the employee concerned)

Name Father's Name Surname

Date of Birth as recorded in the
service book/ S.S.C. Certificate /
School Leaving Certificate

Place of Birth
Village / Town / Taluka / District / State

Nationality & Religion

Whether belongs to Scheduled
Castes / Scheduled Tribes /
Nomadic Tribes / Other Backward

Classes etc.

Home Town

(With residential address

Permanent Address (Local)

Date of joining University / College
services & designation at the time
of first appointment.

Intermediary positions held between
Initial appointment & present
position if any Positions period from

(i)

(ii)

(iii)

Mother Tongue :-

Language Known :-

Qualifications & degrees

University :-

Confidential Assessment Report Regarding Ability and Character.

Name

Period of Report

Post or Posts held during the

Period of report

Department / Office / Section

Leave taken during the period

E.L. / C. L./ Other Leave

Performance Assessment

Sr. No.	Item	V Good A	Good B	Fair C	Average D	Below Average E
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I Technical Adequacy :-

1. Industry ...
2. Application ...
3. Initiative ...
4. Neatness ...
5. Accuracy ...
6. Punctuality in work ...
7. Methodical and
systematic working
8. Promptness in disposal
9. Regularity in attendance.
10. Relations with Superiors.
11. Relations with Colleagues.
12. Relations with members
of public
13. Dependability.
14. Capacity to get work done

(4)

Sr. No.	Item	(4)				
		V Good A	Good B	Fair C	Average D	Below Average E

II General Impression :

1. General impression & grasp
2. Leadership qualities.
3. Level of knowledge
(related to the section /
Department)
4. Tech ability
(Wherever relevant)
5. Spl. complementary aptitude
qualities etc other than job
requirements.

III Recommendation -

- (a) Administrative ability inclu-
ding judgement initiative,
promptness and drive
- (b) Fitness to continue in the
present post
- (c) Fitness for promotion
- (d) Any other item not covered
but which you would like
to record. Please specify
the aspect.
- (e) Recommendation-observ-
ation of Reporting Officer.

Date :

Place :

.....
(Signature)
Name and Designation of
the Reporting Officer.

Note :- Items covered by I, II and III may not be applicable to all categories of employees and in all cases. Where assessment in respect of particular item is not necessary, the Reporting Officer should state in the column as A (not applicable). Assessment has to be done in five points scale i.e. Very Good, Good, Fair, Average and Below Average.

Please Mark ' ✓ ' in appropriate columns to arrive at final assessment.

Observation of Reviewing Office on the Report

(To be filled in by the Reviewing Officer)

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1. Length of service under Reviewing Officer during the period under Report

2. Do you agree with the Reporting Officer or do you wish to modify or add to his assessment ?

3. Observation of remarks to the employee and clarification from the reporting Officer sought, if any.

4. Communication of remarks to the employees and clarification from the reporting Officer sought if any.

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(Signature)
Name and Designation of
the Reviewing Officer.

Date :

Place :

PART - II

**Confidential Self-Assessment Report regarding
ability & Character.**

(for the Officers & Superintendents)

1. Name
2. Department / Office/ Post
3. Period of Report
4. Leave taken during the Period C.L./E.L. / Other leaves)
5. Additional Qualifications / training etc.
earned / undergone during the period
6. Promotions / rewards appreciation if any
7. Length of Service in the Present or similar post
8. Brief description of your duties indication the norms, standards,
targets to be observed etc.
9. Supervisory ability / capacity to get work done)
10. Relations with staff / members of public / superio's.
11. Have you imported any training guidance to your staff ?
12. Were you required to take any disciplinary action against any of your
subordinates if so state number of cases reported.
13. Could you maintain c-ordial atmosphere in your department if 'yes'
state whether the following methods you adopted :
(a) Welfare activity (b) By your own hard work (c) Accomodativeness
and (d) Impartiality and just method.
14. How would you rank your leadership ability.
15. What efforts were made by you to acquire or promote the quality of
leadership.
16. The quality & quantity of work done during the Period of report as
compared with the prescribed norms standards pr targets / or previous
year.
17. Details of any specific items (s of work done by you which you think
especially noteworthy / innovative / economical.
18. Are you aware of the opinion of public / teachers employees etc. about
your Section state what it is.

19. Do you think that there is a scope for improvement.
20. If in your own opinion you were unable to maintain the expected quality or quantity of performance, indicate briefly your reasons for the same and the action you propose to take. What measure would you suggest/ intend to take to step up the present Performance.
21. State what special difficulty did you experience. Were there beyond your Control.
22. State whether you could get guidance from your superiors /you could have done better with better guidance / adequate guidance and assistance were provided.
23. State whether you could derive 'job satisfaction' from your work during the period of report.
24. Your general assessment :
Very Good / Good / Fair / Average / Below Average.

Observation of the Reporting Officer

1. State whether the facts stated above are correct If not state the correct facts.
2. Do you agree that the self - assessment is honest and based on national and impartial, self-observation. If not, give reasons why you do not agree.
3. State whether the performance of Officer during the period of self- assesment can be rate as :
(1) Very Good (2) Good (3) Fair (4) Average (5) Below Average
4. Whether in your opnion the officer has -
 - 1) Potentiality to develop
 - 2) Desire to develop
 - 3) Capability of making adequate efforts to develop.
5. Any other remarks

Date :

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Place :

(Signature)
Name and Designation of
the Reporting Officer.