6.3.5 - Institutions Performance Appraisal System for teaching and non- teaching staff

Bharatiya Seva Sadan's

Smt. Radhadevi Goenka College For Women, Akola

(Certified Minority Institution)   (Affiliated to SGB Amravati University, Amravati)

Accredited by NAAC in III Cycle, "A" Grade with CGPA 3.07
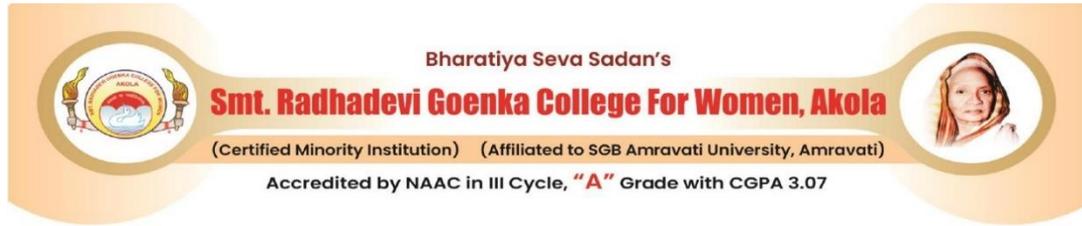
CERTIFICATE

This is to certify that the documents attached in **Criterion VI Governance, Leadership and Management** are verified and found correct to the best of my knowledge.
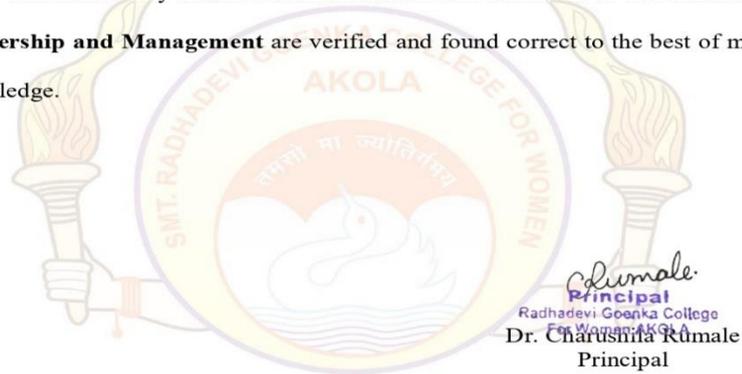
Dr. Chanishila Rumale
Principal

Principal
Radhadevi Goenka College
For Women, AKOLA

Index

1. API format for Teaching Staff

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Appendix-II

Sant Gadge Baba Amravati University, Amravati

PBAS Proforma for Promotion under CAS

Assessment Period: <u>2023-24</u>

(PART A, PART B & PART C)

(For Teachers other than Physical Education Person, Librarians & Teachers of Music and Performing Arts)

</div>

PART A: GENERAL INFORMATION

1. Name (in Block Letters)   :

2. Father's / Husband's Name   :

3. Department   :

4. Current Designation & Grade Pay   :

5. Date of last Promotion   :

6. Address for correspondence

   (With Pin code)   :

7. Permanent Address

   (With Pin code)   :

         Telephone No.   :

E-mail   :

8. Whether acquired any degrees or fresh academic qualifications during the year:

9. Academic Staff College Orientation / Refresher course attended during the year   :

Sr. No.	Name of the course / Summer school	Place	Duration	Sponsoring Agency
1				

Date: /   /2023

<div align="right">

Signature of Teacher

</div>

PARTB: ACADEMIC PERFORMANCEINDICATORS
CATEGORY: I
TEACHING, LEARNING AND EVALUATION RELATED ACTIVITIES

I a. Direct Teaching (Lectures/ Practical/ Tutorials/ Field Work / Project Supervision taken should be based on verifiable records.).

Sr. No.	Course/Paper	level	Mode of teaching*	Hours allotted per week	Hours Engaged	Percentage of lectures engaged/ conducted	Grading	Proof Document**
Odd Semester								
1								
2								
3								
4								
Even Semester								
1								
2								
3								
4								
Total								

* Lecture (L), Tutorial (T), Practical (P), Field Work (FW), Project Supervision (PrS)

Grading Criterion:- 80% and above – Good; Below 80% but 70% and above- Satisfactory; Less than 70%-**Not satisfactory.**

**As per table under the document ANNEXURE I (A)

Overall Grading (Category: I)	

Signature of Teacher

Verified and found correct:

_____

Signature of V.C./H.O.D./Principal

Final Score approved by the Screening / Selection Committee:
(For Category:I)

Signature of Chairman
Screening / Selection Committee

PART B : *ACADEMIC PERFORMANCE INDICATORS*

CATEGORY : *II*

INVOLVEMENT IN ADMINISTRATIVE, EXAMINATION, CO-CURRICULAR, EXTENSION AND PROFESSIONAL DEVELOPMENT RELATED ACTIVITIES.

II i. Administrative Responsibility.

Sr. No.	Responsibility	Nature of Work	Grading	Proof Document**
1				
2				
3				

II ii. Contribution to corporate life through committees and duties assigned by the authority.

Sr. No.	Responsibility	Nature of Work	Grading	Proof Document**
1				
2				

II iii. Examination Work:

Sr. No.	Responsibility	Nature of Work	Grading	Proof Document**
1				
2				
3				

II iv. Discipline related co-curricular activities:

Sr. No.	Responsibility	Nature of Work	Grading	Proof Document**
1				
2				
3				

II v. Other co-curricular activities:

Sr. No.	Responsibility	Nature of Work	Grading	Proof Document**
1				
2				

II vi. Extension and dissemination activities:

Sr. No.	Responsibility	Nature of Work	Grading	Proof Document**
1				
2				

II vii. Institutional governance:

Sr. No.	Responsibility	Nature of Work	Grading	Proof Document**
1				

II viii. Conduct of Lectures:

Sr. No.	Responsibility	Nature of Work	Grading	Proof Document**
1				

II ix. Participatory and Innovative Learning:

Sr. No.	Responsibility	Nature of Work	Grading	Proof Document**
1				
2				
3				

II x. Evidence of actively involved in guiding Ph.D. students:

Sr. No.	No. of Ph.D. Students Registered	No. of Ph.D.Students submittedThesis	No of Students Awarded Ph.D. Degree	Grading	Proof Document**
1					

II xi. Conduct of Research Projects:

Sr. No.	Title of Project	Major/ Minor	Period of Award	Amount Approved	Name of Funding Agency	Grading	Proof Document**
1							

II xii. Research paper Published:

Sr. No.	Title with page nos.	Journal	ISSN / ISBN No.	Whether peer reviewed Impact Factor, if any	No. of co-authors	Whether you are the main author	Whether Refereed / other Journal as notified by the UGC#	Grading	Proof Document**
1									

Grading Criteria:- Good - Involved in at least 3 Activities; **Satisfactory**- 1-2 activities and
Not-satisfactory - Not involved/ undertaken any of the activities.
**As per table under the document Annexure II (A)

Overall Grading (Category: II)	

Signature of Teacher

Verified and found correct:

_____
Signature of V.C./Principal/ H.O.D.

Final Score approved by the Screening /
Selection Committee:
(For Category: II)

Signature of Chairman
Screening / Selection Committee

PART B : *ACADEMIC PERFORMANCE INDICATORS*
CATEGORY : III
RESEARCH, PUBLICATIONS AND ACADEMIC CONTRIBUTIONS

III A. Research Papers publication:

Sr. No.	Title with page nos.	Journal	ISSN / ISBN No.	Whether peer reviewed Impact Factor, if any	No. of co-aut hors	Wheth er you are the main author	Whether Refereed / other Journal as notified by the UGC#	Augme nt API Score	Proof Docume nt**
			NIL						
Total									

III B.a. Publications other than journal articles (books, chapters in books):

Sr. No.	Title with page nos./ Chapter with Page No.	Book Title, editor & publishe r	Publicatio n Internatio nal/ National/ Local	ISSN / ISBN No	Whether approved by Universit y	No. of co-autho rs	Whether you are the main author	API Scor e	Proof Docume nt**
				NIL					
Total									

III B.b. Publications in the form of Cassettes/CDs/DVDs, Tracks published/ recorded:

Sr. No.	Cassettes/CDs/DVD s, Tracks published/ Recorded	Company	Publication International / National/ Local	Whether approved by University	No. of artists	Whether you are the main artist	API Score	Proof Document**
1								
Total								

III B.c. Publications in the form of individual Cassettes/CDs/DVDs, Tracks published/ Recorded:

Sr. No.	Individual Cassettes/CDs/DVDs, Tracks published/ Recorded	Company	Publication International / National/ Local	Whether approved by University	API Score	Proof Document**
1						
Total						

III C. CREATION OF ICT MEDIATED PEDAGOGY AND CONTENT ANDDEVELOPMENT OF NEW AND INNOVATIVE COURSES AND CURRICULA

Sr. No.	Innovative Pedagogy/ New Curricula/ Courses/ MOOCs/ E-Content	Name of Activity	Authority Concern	Publisher	Course Credit/ Module	API Score	Proof Document**
1							
Total							

III D.a RESEARCH GUIDANCE:

Sr. No.	Number Enrolled	Thesis Submitted	Degree awarded Course Credit/ Module	API Score	Proof Document**
M.Phil.					
Ph.D.					
P.G. Dissertion					
Total					

III D.b RESEARCH PROJECTS COMPLETED:
III D. b (i). Sponsored Projects:

Sr. No.	Title	Agency	Period	Grant/Amount Mobilized (Rs. Lakh)	Policy Document Generated	API Score	Proof Document**
1							
Total							

III D.b (ii). Consultancy Projects:

Sr. No.	Title	Agency	Period	Grant/Amount Mobilized (Rs. Lakh)	Policy Document Generated	API Score	Proof Document**
1							
Total							

III D.c ONGOING RESEARCH PROJECTS:
III D.c (i). Sponsored Projects:

Sr. No.	Title	Agency	Period	Grant/Amount Mobilized (Rs. Lakh)	Policy Document Generated	API Score	Proof Document**
1							
Total							

III D. c (ii). Consultancy Projects:

Sr. No.	Title	Agency	Period	Grant/Amount Mobilized (Rs. Lakh)	Policy Document Generated	API Score	Proof Document**
1							
Total							

III E.a Patents Awards:

Sr. No.	Title of Patents	Award conferring Organization	National/ International	Patent Number	API Score	Proof Document**
1						
2						
Total						

III E. b Policy Document:

Sr. No.	Title of Documents	Policy Document Submitted to	International /National/ State Gov./ Central Gov.	Publisher	API Score	Proof Document**
1						
2						
Total						

III E. c. Fellowships and Awards:

Sr. No.	Fellowship/ Award	Award conferring Organization	Event Organized by	Whether international / national / state / regional /college or university level	API Score	Proof Document**
1						
2						
Total						

III F. Invited lectures / Paper delivered in conferences / seminars:

Sr. No.	Invited Talk/ Paper presented	Title of Conference / Seminar	Event Organized by	Whether International (Abroad) /International (Within Country)National / State / Regional /CollegeorUniversitylevel	API Score	Proof Document**
1						
2						
Total						

Note:
- ❖ Paper presented if part of edited book or proceeding then it can be claimed only once.
- ❖ For joint supervision of research students, the formula shall be 70% of the total score for Supervisor and Co-supervisor. Supervisor and Co-supervisor, both shall get 7 marks each.
- ❖ *For the purpose of calculating research score of the teacher, the combined research score from the categories of 5(b). Policy Document and 6. Invited lectures/Resource Person/Paper presentation shall have an upper capping of thirty percent of the total research score of the teacher concerned.

**As per table under the document Annexure III (A)

Total Score (Category: III)	

<div align="right">

Signature of Teacher

</div>

Verified and found correct:

<div align="right">

_____

Signature of V.C./Principal/ H.O.D.

</div>

Final Score approved by the Screening / Selection Committee:
(For Category: II)

<div align="right">

Signature of Chairman
Screening / Selection Committee

</div>

IV. SUMMARY OF GRADES / API SCORES

Category	Criteria	Last Academic	API Score for	Annual Av. API Score for Assessment Period for Category III Only
I	Assessment Criterion for Teaching, Learning and Evaluation Related Activities			
II	Involvement in Administrative, Examination, Co-curricular, Extension and Professional Development Related Activities			
III	Research and Academic Contributions			

<div align="right">

Signature of Teacher

</div>

Verified and found correct:

<div align="right">

Signature of V.C./Principal/ H.O.D.

</div>

Final Score approved by the Screening / Selection Committee:
(For Category:II)

<div align="right">

Signature of Chairman
Screening / Selection Committee

</div>

PART C: OTHER RELEVANT INFORMATION

Please give details of any other credential, significant contributions, awards received etc. not mentioned earlier.

Sr.No.	Details (Mention Year, value etc. where relevant)
1	
2	
3	
4	

*Annexure-IV

LIST OF ENCLOSURES:
(Please attach, copies of certificates, sanction orders, papers etc. wherever necessary)
LIST OF ENCLOSURES: (Please attach, copies of certificates, sanction orders, papers etc.

wherever necessary.

1.
2.
3.
4.
5.

I certify that the information provided is correct as per records available with the University / College and / or documents enclosed along with the duly filled PBAS proforma.

Signature of the faculty with
Designation, Place & Date

Signature of V.C./ School
Chairperson / Principal / HOD

Signature of V.C./ School Chairperson /
Principal / HOD

N:B: The Annual Self-Assessment proforma duly filled along with all enclosures, submitted for CAS promotions will be verified by the university/college and information filed with the IQAC.

Name:
Designation: Assistant Professor   **Assessment Year: 2023-24**

EVALUATION BY THE HEAD OF THE DEPARTMENT OR PRINCIPAL

a)   State whether the facts stated above are correct, if not, state the correct facts

b)   Do you agree with the Performance based appraisal done by the teacher?

       If not, give reasons why you do not agree.

I)   Verification & Evaluation in respects of Grade/ API

Item	Correct	Exaggerated	Excellent	Very Good	Average
Category I					
Category II					
Category III					
A					
B					
C					
D					
E					

II   A)   *General Intelligence*   : _____

     B)   *Capacity to get work in Respect of research*

       &teaching   : _____

     C)   *Technical Ability*   : _____

     D)   *Administrative ability including Judgment initiative and drive*   : _____

       (if applicable)

     E)   *Integrity and Character*   : _____

     F)   *Whether powers delegated are Fully utilized.*   : _____

     G)   *General Assessment_* A+ = Outstanding, A = Very Good, B+ = Positively Good ,B = Good, C+ = Satisfactory, C = Not Satisfactory*

       (Strike out which is not applicable.)*

Date: /   /   *Signature of Reporting Officer*

Observation of the Reviewing Officer (Vice-Chancellor):

_____

_____

_____

_____

_____

_____

Date: / /   **Signature of Reviewing Officer**

2. CR format for Teaching Staff

	Name of the College - Smt. Radhadevi Goenka College for Women, Akola.				
	SELF ASSESSMENT FORM OF THE PRINCIPAL / COLLEGE TEACHER				
	(FOR THE YEAR 2023-2024)				
	PART - I (BASIC INFORMATION)				
1)	**Full Name**	**:-**			
2)	**Designation**	**:-**			
3)	**Department**	**:-**			
4)	**Subject taught and faculty**	**:-**			
5)	**Date of joining the present university**	**:-**			
6)	**Date of Birth**	**:-**			
7)	**Place of Birth (Village /Town/Taluka/District)**	**:-**			
8)	**Nationality and Religion**	**:-**			
9)	**Whether belongs to SC/ST/OBC/OPEN**	**:-**			
10)	**Permanent Address**	**:-**			
11)	**Mother Tongue**	**:-**			
12)	**Language Known**	**:-**			
13)	**Whether any Immovable property held, If so, what and where**	**:-**			
14)	**Qualification of the Teacher**	**:-**			

Degree and Post-Graduate degree examination	Special / Principal subject offered	Allied additional subordinate subject offered	Class obtained	Year of passing	University
					2…
2					

15)	Teaching experience at the College Level		:-	Year --------	Month--------

Name of the previous Institutions	Period of service from t o	Designation	Classes taught	Subjects taught	Scale of pay

16)	I) Courses taught		:-		
	II) Number of periods per week as per prescribed norms		:-		

	Work - load			
	U.G.	P.G.	M. Phil.	Ph.D.
1) Actual number of periods per week				
2) Lectures -				
a) Tutorials				
b) Practical				
c) Seminars				
d) Dissertations				
e) Others				

		PART - II			
		SELF ASSESSMENT OF THE TEACHER			
		(NOTE - Self Assessment should be in short, within the limit of space provided)			
I)	*Teaching Methods applied*	*:-*			
	(Name and describe new				
	teaching methods used, if any				
	(Beside lecture/method) i.e.				
	i) Distributing lecture, synopsis	*:-*			
	and biography				
	ii) Encouraging question in	*:-*			
	class				
	iii) Announcing topics for	*:-*			
	discussion in advance				
					3...
		3			
	iv) Holding seminars	*:-*			
			....		
	v) Use of audio visual aids	*:-*			
	(Whether facilities exist)		---		
II)	*Contribution to a research*	*:-*			
	schemes approved by the		---		
	UGC, DST, ICAR, ICSSR &		---		
	others, if any.		---		
III)	*Any other contribution in*				
	i) Teaching Methods	*:-*			
	ii) Evaluation Techniques	*:-*			
	iii) Course Development etc.	*:-*			
IV)	*Academic and professional*				
	growth (During the year)				
	i) Research qualification ac-	*:-*			

	quired			--	
	ii) Research projects under	*:-*			
	taken		--		
	iii) Research papers published	*:-*			
	indicating titles and names of				
	journals in which published				
	iv) Guidance rendered to re-	*:-*			
	search scholar		--		
	v) Participation in Seminars	*:-*			
	Workshops and Conference				
	vi) Participation in Orientation	*:-*			
	programmes Refresher course		--		
	etc.				
	vii) Any other type of training	*:-*			
	(Whenever such facilities exist)		--		
V)	*Participation in Extra Curricular*	*:-*	--		
	activities		--		
	i) Extracurricular activities	*:-*			
	debates, cultural activities,				
	counselling to students planning				
	forum, Union, NSS,				
	NCC, Scouting etc.		--		
					4...

<div align="center">4</div>

	ii) Service to community Adult	*:-*	--		
VI)	*Help in departmental adminis-*	*:-*			
	trative activities by way of				
	membership of various committees				
	such as Discipline Committee				
	Admission Committee, Students				
	Welfare Committee etc.				

VII)	Any other Information about his contribution (not conveyed above) relevant to a proper assessment of activities.	:-			
VIII)	General Observations -				
	i) Attendance				
	a) Regularity	:-			
	b) Punctuality	:-			
	ii) Students teachers Relationship	:-			
	iii) Colleague relationship	:-			
	iv) Class control	:-			
	v) Reading habits and other matters	:-			
IX)	Your own assessment of your performance for the year under report in regard to				
	a) The quality and quantity of work done and how it com- pared with the prescribed Norms, standards or targets.				
	b) Guiding, training, control- ling Class				
	c) Details of any specific item(s) of work done by you which think especially noteworthy				
	d) If, in your opinion you were unable to maintain the expected quality or quantity in performance, in any respect indicate your reasons				

	Why this happened.					
Date-				*(Signature of the teacher)*		
						5...
Name of the teacher -						
			5			

EVALUATION BY THE HEAD OF THE DEPARTMENT OR PRINCIPAL

a)	*State whether the facts stated above are correct; if not, state the correct facts.*					
b)	*Do you agree with self assessment of performance done by the teacher ? If not, give*					
	reasons why you do not agree.					
I)	*Actual verification & evaluation in respects of Part II*					
Item	*Correct*	*Exaggerated*	*Excellent*	*Very Good*	*Average*	
I						
II						
III						
IV						
V						
VI						
VII						
VIII						
IX						
ii)	*A) General Intelligence*		*:-*	--		
	B) Capacity to get work done in		*:-*	--		
	respect of research& teaching			--		
	C) Technical Ability		*:-*	--		
	D) Administrative ability including		*:-*	--		
	judgement initiative and drive					
	(if applicable)					
	E) Integrity and character					
	F) Whether powers delegated					
	are fully utilized					

	G) General Assessment ------ *A+ =Outstanding, A=Very Good, B+= Positively Good,				
		B= Good, B-= Average, C= Below Average			
	(* Strike out which is not applicable)				
Date / /			Signature of Reporting Officer		

....

Observations of the Reviewing Officer					
_____					
_____					
_____					
_____					
_____					
Date / /			Signature of Reviewing Officer		

3. Scrutiny Committee Report format for CAS

SCRUTINY COMMITTEE REPORT FOR PROMOTION UNDER CAS

The proposal for promotion under CAS submitted by……………**,** has been scrutinized thoroughly as per Direction No. 17/2019 dated 15th July 2019 of SGBAU, Amravati. The following observations are noted by the scrutiny committee.

Date of Joining

Date of Award of Ph. D.

Current Designation & Academic Level:

Date of Last Promotion

Due Date of Promotion

The designation and grade pay applied for under
CAS

> **Completed FDP (02), STC (01) NEP Orientation (01)**

IV. SUMMARY OF API SCORES

Category	Criteria	2021-22	2022-23	2023-24	Total API Score for Assessment Period
I	Teaching, learning and Evaluation related activities				
II	Co-curricular & Extension, Related Professional Development Activities				
III	Research, Publications and AcademicContributions (For the entire period)				

Scrutiny Committee Remark: As per above observations the proposal is recommended for the further process of CAS.

S.N.	Name	Designation	Sign.
1)	Dr. Sanjay Vite	-Convener (IQAC-Coordinator)	
2)	Prof. Lalit Bhatti	-IQAC-Co-Coordinator	
3)	Dr. Ravindra Mundre	-Member	
4)	Dr. Ambadas Pande	-Member	
5)	Prof. Ajay Shingade	-Member	
6)	Mr. Ram Baheti	-Member	
7)	Dr. Nitin Chaudhari	-Member	

Date:

4. CR format for Non-Teaching Staff

<div align="center">

गोपनीय अहवाल नमुना

वरीष्ठ महाविद्यालयातील शिक्षकेत्तर कर्मचाऱ्याकरीता स्टॅन्डर्ड कोड १९८४ मधील तरतुदीनुसार
(गोपनिय अहवालाचा नमुना) वैयक्तीक माहिती-

</div>

१) पुर्ण नांव :- --

२) वडीलाचे नांव :- --

३) जन्म तारीख :- --

४) जन्मस्थान :- --

५) राष्ट्रीयत्व व धर्म :- --

६) जात / संवर्ग :- --

७) पदनाम :- --

८) शैक्षणिक पात्रता :- --

९) सध्याचे पदावर रुजू झाल्याचा :- --
दिनांक

१०) महाविद्यालयाचे नांव :- --

११) एकुण सेवा काळ :- --

१२) वेतन श्रेणी :- --

१३) सध्याचा पत्ता :- --

१४) दुरध्वनी / मोबाईल :- --

१५) मुळ ठिकाणचा पत्ता :- --

१६) स्थावर मालमत्ता असल्यास पत्ता :- --

१७) मातृभाषा :- --

१८) अवगत असलेल्या भाषा :- --

१९) प्रदान करण्यात आलेला कामाचा प्रकार :- --

२०) आपण केलेल्या कामपैकी एखाद्या :- --
चांगल्या कामाची नोंद

दिनांक :-

स्थान :- कर्मचाऱ्याची सही व नांव

<div align="center">22</div>

Confidential Assessment Report regarding ability and character

पुर्ण नांव	:-	--
Name	:-	_____
प्रतिवेदनाचा कालावधी	:-	०१ / ०४ / २०१८ ते ३१ / ०३ / २०१९
Period of Report		
धारण केलेले पद / पदे	:-	
Post/Posts held	:-	
Department (विभाग)	:-	
Leave Taken in this period		

Performance Assessment

1) उद्योगपियता व कार्यतत्परता :- अत्युत्कृष्ट, उत्कृष्ट, चांगले, साधारण, साधारणपेक्षा कमी
   Industry & Application :- Outstanding, Very Good, Good, Average, Below average

2) हाताखालील कर्मचाऱ्यांकडून काम :- अत्युत्कृष्ट, उत्कृष्ट, चांगले, साधारण, साधारणपेक्षा कमी
   करुन घेण्याची क्षमता
   Capacity to get work done :- Outstanding, Very Good, Good, Average, Below average
   By subordinates

3) सहकारी व जनता यांचेशी :- सहकार्याचे, सौजन्याचे, मदतीचे, उदासीन, अमैत्रीपुर्ण
   असलेले संबंध
   Relations with colleagues :- Co-operative, Courteous, Helpful, Indifferent, Unfriendly
   And the public

4) सर्वसाधारण बुध्दीमत्ता :- अतिशय बुध्दीमान, बुध्दीमान, हुशार, साधारण, मंदबुध्दी
   General Intelligence :- Very brilliant, Brilliant, Intelligent, Average, Dull

5) निर्णय शक्ती, उपक्रमशिलता :- अत्युत्कृष्ट, उत्कृष्ट, निश्चित चांगली, चांगली, साधारण, प्रशासनिक
   व धडाडी यासह कार्यक्षमता कार्यक्षमता नाही
   Administrative Activity :- Outstanding, Very good, Positively good, good,
   Including judgment initiate Average, Below average
   And drive

6) तांत्रीक कार्यक्षमता(संबंधित असेल तेथे) :-
   Technical professional :-
   Ability (where relevant)

7) विशेष कल :- ---
   Special Attitude :-

8) सचोटी व चारिञ्य :- ---
   Integrity & Character :-

9) प्रदान करण्यात आलेल्या :- होय   अंशत :   नाही
   अधिकारांचा वापर करतात काय ?
   Whether powers delegted :- Yes   Partly   NO
   Are fully utilized ?

10) पदोन्नतीसाठी पात्रता :- अयोग्य , जेष्ठतेनुसार, योग्य, त्वरीत बढतीसाठी योग्य
    Fitness for promotion :- Unfit, Fit in normal course (according to seniority)
       Fit for accelerated promotion

11) प्रशिक्षणासाठी आवश्यक :- येथे आवश्यक त्या क्षेत्राचा उल्लेख करावा.
    :-

12) प्रकृतीमान :- चांगले नाही,   चांगले,   उत्कृष्ट
    State of Health :- Not Good,   Good   Very Good

13) क्षेत्रीय स्तरावर काम :- आहे,   नाही,   संबंधित नाही
    करण्यासाठी योग्यता
    Fitness for Field Work :- Yes,   No,   Not related

14) संगणकावर काम करण्याची आवड :- आहे,   नाही,   दिसून आली नाही
    Willingness to work :- Yes,   No,   Not Seen
    On Computer

15) सर्वसाधारण मुल्यमापन :-
    General Assessment :-

16) प्रतवारी (हाताने लिहावी) Grading (write in Handwriting) :-
     A+ Outstanding, A Very god, B+ Positively Good,
     B Good, B- Average, C Below average

Place :-

Date :-   Signature, Name & Designation
                                              Of the Reporting Officer

गोपनीय अहवाल नमुना

१) कर्मचाऱ्याचे पुर्ण नांव   :-   --

२) शैक्षणिक पात्रता   :-   ३) धारण केलेले पद   :-

४) जन्म तारीख   :-   ५) जात / संवर्ग   :-

६) सध्याच्या पदावर रुजू   :-   ७) एकूण सेवा काळ   :-
    होण्याचा दिनांक

८) वेतन श्रेणी   :-

९) प्रतिवेदनेचा कालावधी   :-   ०१ / ०४ / २०१८ ते ३१ / ०३ / २०१९

१०) वरील कालावधीत देण्यात आलेली प्रतवारी :-

    विभाग प्रमुखांचा अभिप्राय : --

                           स्वाक्षरी

    प्राचार्याचा अभिप्राय : --

                    प्राचार्याची स्वाक्षरी

    पुनर्विलोकन अधिकाऱ्याचा निरीक्षण अहवाल
    प्राचार्य यांच्या मताशी सहमत आहे किंवा
    नसल्यास त्यांची कारणे   --

    दिनांक :-
    ठिकाण : -   अध्यक्ष / सचिव