

PERFORMANCE APPRAISAL REPORT OF THE EXECUTIVES OF HSL/SSL

(A Govt. of India Enterprise)

For the year/period from **1st April 2017** to **31st March, 2018**

Each and every section of this form should be filled by the concerned officer/authority after carefully reading the instruction attached to this form.

Section I - Basic information

(To be filled in by the Human Resource/ Personnel / Administration Department of HSL/SSL)

Personal Data of the officer reported upon

1. Name of the officer reported upon: _____
2. Employee Number : _____
3. Date of Birth : _____
4. Brief Academic & Professional Qualifications: _____
5. (a) Name of the Post held : _____
(b) Grade of Post held: _____
(c) Date of Continuous Appointment in this Post: _____
(d), Present Pay and Scale of Pay: Rs _____/-, Rs _____
(e) Data of continuous Appointment in the enterprise: _____
6. (a) Date of first public Enterprise Appointment : _____
(b) Scale of Pay of the Post on First Appointment : : _____

7. Reporting, Reviewing and Accepting Authorities during the year

	Name & Designation	Period Worked	
		Form	To
Reporting Authority			
Reviewing Authority			
Accepting Authority			

8. Period of absence on leave .etc. during the year

	Period	Type	Remarks
On Leave other than Casual Leave			
Others (Specify)			

9. Qualification acquired and Training programmers attended during the year:

(a) Details of Qualification acquired during the year

S.No.	Details of Qualification	Institution from which studied	Details of subjects Studied and the marls obtained

(b) Details of Training programme attended during the year

Date from	Date to	Institute	Subject

10. Awards/ Honours received during the year

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11. Number of officers for whom PAR was not written by the officer reported upon as Reporting/Reviewing Authority for the previous year.

Signature:
Name & Designation of the Officer of the
Human Resource/Personnel/Administration Department

Date:

Section II: Self-appraisal of the Officer reported upon

1. Brief description of responsibilities:

(Objectives of the position you hold and the responsibilities you are required to discharge, in about 100 words)

2. Annual work plan and achievement:

Tasks to be performed	Target	Achieved	Remarks
I-Target of work including Production or Sales, if any			
i)			
ii)			
iii)			
iv)			
v)			
vi)			
Total(I to X)			
iii-Grand Total			

3. During the period under report, do you believe that you have made any exception contribution, e.g., successful completion of an extraordinarily challenging task or major systemic improvement (resulting in significant benefits to the Company and/or reduction in time and costs)? If so, please give a verbal description(within 100 words):

4. What are the constraints that hindered your performance?

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5. Please indicate specific areas of training that will add value to you:

For the current assignment:
For your future career:

6. Declaration

Have you filled your immovable property return in the prescribed format as due? If yes, please mention the date	Yes/No	
Have you undergone the suggested medical check-up?	Yes/No	
Have you set the annual work plan for all officers for current year, in respect of whom you are the reporting Authority?	Yes/No	

Date:

Signature of the officer reported upon

Section-III-Appraisal of the Reporting Authority (please read the relevant instructions attached to this form before filling up this section)

- 1. Please state whether you agree with response relating to the accomplishments of the work plan as filled out in section II. If not, please furnish factual details.**

- 2. Please comment on the claim(If any) made by the officer reported upon about his exceptional contribution.**

- 3. Has the officer reported upon met with any significant shortfall in achieving the targets? If yes, please furnish factual details.**

- 4. Do you agree with the constraints mentioned by the officer reported upon that had hindered his performance and, if so to what extent?**

- 5. Do you agree with the competency up-gradation needs as identified by the Officer?**

6. (A) Assessment by Reporting Officer (Scores out of Max 5 Marks) each rating points.

Rating details	Max. Score	Rating Score
(1) Job Knowledge	05	
(2) Quality of work output	05	
(3) Initiative & Dependability	05	
(4) Attitude for work	05	
(5) Planning & Organising	05	
(6) Judgement & decision-making ability	05	
(7) Communication Skill(Verbal & Written)	05	
(8) Inter personal relationship & team work	05	
(9) Commitment & sense of responsibility	05	
(10) Creativity and aptitude for R&D activities	05	
(11) Leadership	05	
(12) Control & Management of Staff	05	
(13) Cost consciousness	05	
(14) Ability to motivate and development of staff	05	
(15) Attendance/punctuality & discipline	05	
	(A) Total 75	

6. (B) Special Achievements during the year

Tasks, Targets & Time frame _____

Score out of Max 25 Marks _____

6. (C) Grand Total score out of Max 100 Marks (A+B) _____

7. Integrity(Please comment on the integrity of the officer upon by choosing any one of the following options):

i)	Beyond doubt	
ii)	Integrity of the officer is doubtful A separate secret note is attached.	
iii)	Noting adverse has been received about the Officer	

8. Pen picture by Reporting Officer. Please comment (in about 100 words) on the overall qualities of the Officer including areas of strength and those which need improvements.

9. Overall Assessment by Reporting Officer

Outstanding (More than 90)	Very good (75-90)	Good (60-74)	Satisfactory (40-59)	Poor (less than 40)
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Assessment of Integrity _____

(If the Officer integrity is beyond doubt, it should be so stated)

Date:

Signature of Reporting Authority
Name & Designation of Reporting Authority

Section IV- Review by the Reviewing Authority(Please read the relevant instructions attached to this form before filling up this section)

1. Do you agree with the assessment of the Reporting Officer with respect to discharge of responsibilities and various attributes of the officer reported upon in section III?

Yes/No

2. Do you agree with the assessment of the Reporting Officer in respect of extraordinary achievements and/or significant shortfalls of the Officer reported upon ?

Yes/No

3. In case of difference of opinion, details and reasons for the same may be given.

4. Comments, if any, on the pen picture written by the Reporting Authority.

5. Overall Assessment by Reviewing Officer

Outstanding Very good Good Satisfactory Poor

Other Remarks, if any _____

Date:

Signature of Reviewing Authority
Name & Designation of Reviewing Authority

Section V- Acceptance by the Accepting Authority(Please read the relevant instructions attached to this form before filling up this section

1. Is the overall grade given by the Reporting/Reviewing Authority is consistent with the pen picture given by them?

Yes/No

2. Do you agree with the remarks of the Reporting/Reviewing authorities?

Yes/No

3. In case of difference of opinion, details thereof and reasons for the same may be given.

4. Rating given by final Assessing Authority _____

Other Remarks, if any _____

Date:-

Signature

Section VI: Review by the Acceptance Authority in the light of the representation received from the officer reported upon

1. Whether the Accepting Authority considers any merit for revising the overall grade given earlier to the officer reported upon in light of the representation made by him/her?

Yes/No

2. If yes, please indicate the revised overall grade on a grade of 1-5 (Grade should be assigned on scale of 1 to 5, with 1 referring to the best grade and 5 to the lowest grade).

Date:

Signature of Nodal Officer

Name & Designation of Nodal Officer

Note:

The concerned Nodal Officer shall fill this section based on the orders passed by the Accepting Authority. Copies of the representation made by the Officer reported upon and the orders of the Accepting there on are to be attached.