

# Ideal Institute of Engineering, Kalyani PROFORMA FOR APPRAISAL FORM

(For Non-Teaching Staff)

A. Self assessment of the candidate (to be filled by the Candidat	assessment of the candidate (to be filled by the Candidate
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1. Name : 2. Designation & Department 3. Present Scale of Pay 4. Date of Birth a) Date of joining in the institute b) Designation at the time of b) first joining in the institute c) Basic salary at the time of joining 5. Dates and Salary of last Increment / promotion (if any) a)

6. Detail of additional qualifications

b)

#### 7. Participation in programs (7 points max.)

- i) Skill Upgradation Programme 3 per participation
- ii) Organization of In-house Skill upgradation Programme 5 point
- iii) Participation in In-house Skill upgradation Programme-2 point



## **Employee Self Assessment**

To be completed by employee:

Work Performance (Briefly list your main duties and accomp	plishmen	ts during the a	ppraisal period.)		
Student Service :					
Title de /D 1 de la /Title	•1	. 1 .	1)		
Initiative/Productivity (List important accomplishments dur	ring the a	ppraisai perio	a.)		
** Involvement / Belongingness in the admission procedur (to be decided by principal on the basis of following attr	re –( 2 per	point , 8 point	s Max.)		
a) Innovativeness in publicity.	ibutes)				
b) Participation in Counselling.					
c) Student interaction.					
d)Admission from Direct contact					
** Administrative responsibilities (5 point )					
[Please tick ( $$ ) the appropriate box]					
( Feedback to be given by HOD)					
		Average	Satisfactory	Outstanding	
9 i. Participation in the Anti ragging activity :					
9 ii. Involvement in the other committees	:				
9 iii. Involvement in students extra-curricular activity:					
9 iv. Thrust for further knowledge	:				
9 v. Administrative control :					
Teamwork & Interpersonal Skill					
Goals for the next appraisal year					



#### \*\* Report of Hr Department:

 $Types \ of \ Leaves \ availed \ ON \ (numbers \ only): -TO \ duly \ signed \ by \ the \ Leave \ maintenance \ authority$ 

SL	NATURE OF LEAVE AVAILED	NO. OF DAYS LEAVE GRANTED	WITH PAY	WITHOUT PAY
1	CASUAL LEAVE			
2	EARNED LEAVE			
3	SICK LEAVE			
4	MATERNITY LEAVE			

#### \*\* Disciplinary Action, If any:

- \* Details of Show cause Notice served:
- \* Details of the Charge Sheet served:
- \* Details of warning:

#### \*\* No. of days came late to resume duty:

- \* No. of days Casual Leave deducted towards punitive measure:
- \* Last year annual increment granted/not granted:
- \* Whether any letter of poor performance issued or not?

Date: (Signature of the Candidate)

 $\underline{NOTE:}$  All points are important. None of the points should be kept blank either it should be filled with required data or write N.A / Nil.



### REPORT OF PRINCIPAL/CEO (Confidential)

Date:	Signature: