

ANNUAL PERFORMANCE ASSESSMENT REPORT (APAR) FOR MULTI TASKING STAFF

Department/Office: _____

Reporting for the year/period ending: _____

Part I – Personal Data

(To be filled by the Administrative section of the Department/Office)

1	Name of the Official	
2	Designation/post held	
3	Date of Birth (DD/MM/YYYY)	
4	Whether the officer belongs to Scheduled Caste/Scheduled Tribes?	
5	Date of continuous appointment to the present grade	
6	Whether Permanent/Quasi-permanent or Temporary	
7	Section in which served during the year under report and period of service in each	
8	Period of absence from duty on leave, training, etc. during the year	

Part II – Self Appraisal

(To be filled by the officer reported upon)

1. Brief description of duties:

Date: _____

Signature of the officer

Part III – Appraisal

(To be filled by the Administrative section of the Department/Office)

1) State whether you agree with the submission of the officer filled out in Part II. If not, the extent of disagreement and reasons therefore:

2) Has the officer been reprimanded for indifferent work or for other cause during the period under report? If so give brief particulars:

3) Attitude towards SC and ST:

Assessment of work output (On a scale of 1-10. Weightage to this section would be 40%)

S. No.		Reporting Authority	Reviewing Authority	Initial of Reviewing Authority
1	Accomplishment of work allotted			
2	Quality of output			
	Overall Grading on 'Work Output'			

Assessment on Personal Attributes (On a scale of 1-10. Weightage to this section would be 30%)

S. No.		Reporting Authority	Reviewing Authority	Initial of Reviewing Authority
1	Attitude towards work			
2	Regularity and punctuality in attendance			
3	Maintenance of discipline			
4	Communication skills			
5	Temperament			
6	Sense of responsibility			
7	Capacity to work in time limit			
8	Capacity to work in team Sprite			
9	Inter-personal relations			
	Overall Grading on personal attributes			

Assessment of functional competency (On a scale of 1-10. Weightage to this section would be 30%)

S. No.		Reporting Authority	Reviewing Authority	Initial of Reviewing Authority
1	Knowledge of organisational structure of relevant field			
2	Coordination ability			
	Overall Grading on functional competency			

7) Comment on Integrity of the Officer:

Signature of the officer	Date:
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8) Pen Picture by Reporting Officer on overall qualities of the officer including areas of strength and lesser strength and his attitude towards weaker section:

Signature of the officer	Date:
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9) Overall Grade (9-10: Outstanding, 7-8: Very Good, 5-6: Good, 3-4: Average, 1-2: Poor)

Signature of the officer	Date:
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Signature of the Reporting Officer

Name in Block letters:

Designation:

Date:

Part IV – Remarks by Reviewing Officer

- 1) Do you agree with the assessment of the officer given by the Reporting Officer?

- 2) Overall Grade (9-10: Outstanding, 7-8: Very Good, 5-6: Good, 3-4: Average, 1-2: Poor)

Signature of the Reviewing Officer

Name in Block letters:

Designation:

Date:

Part V – Countersign/Remarks by Accepting Officer

- 1) Do you agree with the assessment of the officer given by the Reporting and Reviewing Officer?

- 2) Overall Grade (9-10: Outstanding, 7-8: Very Good, 5-6: Good, 3-4: Average, 1-2: Poor)

Signature of the Accepting Officer

Name in Block letters:

Designation:

Date: