PERFOMANCE APPRAISAL FORM II

(TO BE SUBMITTED BY EMPLOEES OF AND ABOVE THE OFFICE ASSISTANTS, COPMUTER OPERATORS ETC.)

PART 1

Division: Appraisal of sri, (In block letters) for the period					
Name					
Date of birth					
Post					
Date of entry in CAPE service					
Date of appointment on the prese	ent post				
Date Of Entry In The Presant Div	vision				
Pay and Scale of pay					
Date from which functioning in	the present grade				
continuously					
Subject deal with according to the office order					
distributing work					
a. EDUCATIONAL AND OTHER QUALIFICATIONS					
General	Department	Special	Other Skills, If Any		
1.					
2					
2.					
3					
1					
b. EXPERIENCE					
Division	Category Of	Work	Period		
		F	rom To		
2					

c. SELF ASSESSMENT

To be obtained from the repartee in a separate sheet and field as part of the facing sheet of the form

- 1. Consider only one factor at a time
- 2. Study each factor and the specifications for each grade
- 3. Review upon completion to see that the rating of each factor applies exclusively to the individual's actual performance on his present job.
- 4. Comment fully at the bottom of the page and on reverse side upon any matter which in your opinion needs explanation.
- 5. Put a tick ()mark in the appropriate boxes provide here under

d. ASSESSMENT BY THE REPORTTING OFFICER

Sl .No.	Factors	Grade A (Max.marks-10)	Grade B (Max.marks-6)	Grade C (Max.marks-3)	Grade D (No marks)	Marks Awar ded
1	Intelligence	Extra Ordinary Proficient And Resourceful And Understanding New And Difficult Matters	Quite Able To Handle New And Difficult Matters	Normally Understands A New Situation After Proper Explanations And Handles It If Given All Directions	Poor Comprehension. Usually Fails To Perform A Function Despite Prior Instructions	
2	Discipline	Exemplary Conduct	Observes The Code Of Conduct	Tries To Follow The General Code Of Conduct	Indifferent To General Code Of Conduct	
3	Punctuality And Promptness. Exactness In Keeping Time In Attending Office, Keeping Appointment, Discharge Of Official Duties And Observance Of Time Limits As Per Manuals Standing Orders	Exceptionally Punctual And Prompt	Always S Punctual And Prompt	Usually Punctual And Prompt	Not Punctual And Prompt	
4	Responsibility And Dependability. Conscientiousness Towards Duty	Very Conscientious And Dependable In The Performance Of The Job. Always Ready To Take Responsibility	Conscientious And Steady Worker. Has A Good Record Of Dependability.	Carries Out His Responsibility In A Routine Manner	Often Fails To Perform His Duty. Shirks Responsibility	
5	Interest In The Assignment Interest And The Capacity To See That The Work Is Done	Has Initiative And Takes Keen Interest	Takes Adequate Interest.	Does His Work In A Routine Way	Indifferent In The Discharge Of His Duties	
6	Job Knowledge- Technical And General Knowledge About The Job He Is Doing a. General (Of This And Related Subject)Or Versatility b. Of Work c. Uptodateness	Has An Unusually Through And Comprehensive Mastery Of His Field Of Work. Strives To Expand His Frontier Of Knowledge.	Knows His Job	Possesses Just Adequate Knowledge Required Of The Job	Knowledge Inadequate. Has Not Yet Gained Competence	
7	Nothing Drafting &Correspondence. Ability To Prepare Notes Drafts And Handle Correspondence With Special Reference 1. Accuracy 2. Thoroughness 3. Power Of Analysis 4. Power Of Expression	Vary Precise In Nothing And Drafting Very Prompt And Accurate At Correspondence. His Drafts Need No Editing.	Precise In Nothing And Drafting .Good At Correspondence. His Drafts Seldom Require Editing	Ordinary At Nothing And Drafting. His Drafts Need Editing Tries To Handle Correspondenc e In Time If Properly Supervised.	Poor In Noting And Drafting. Careless In Handling Correspondence	

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8	Maintenance of Registers and Records. Ability in maintaining register and record keeping	Very neat and meticulous in the maintenance of registers and records	Keeps registers and records clean and up-to-date.	Tries to maintain registers and records in a routine manner	Does not maintain registers and records properly	
9	Work Turnover	Consistently exceeds requirements	Frequen0y exceeds Requirements.	Meets requirements	Consistently below requirements	
10	Proficiency in Computer Operation and developing tools for Office Automation	Has excellent command over computers with ability to write front-end programs which usually results in getting things done very quickly	Has good working knowledge of 'Word Processing Spread Sheeting and Presentation Tools and does all correspondences and computations on the Computer	Can work with computers, if required	Not able to operate computer	
11	Minus points for punishment awarded during the reporting period	Service punishment such as Suspension	Considerable punishment such withholding of Increment etc.	Mild punishment such as fines etc.	Warning Memos	
		Maxi Minus Mark -75	Max Minus Mark -50	Max Minus Mark -25	Max Minus Mark -10	
12	GRAND TOTAL (Net marks)					

Nature and Period of Punishment, if any.

For Punishments awarded to the officer, (if any) attach copies of the Orders of Punishment

PART II- SECRET

(Not To Be Shown To the Officer Reported upon)

(This part will not be the basis for promotion in the normal course)

1.	(So as	to judge his suitability for assignment to sensit	ive posts)	
	Offic	anything come to your knowledge which reflect eer's loyalty	adversely on the	Yes () No()
		es' please give details		
2		l separate sheets if necessary)		
2.	a)	 ty and general reputation Has anything comes to your knowledge either Complaint for otherwise which reflect advers 		
		(1) On the officers ability to honestly execute	•	Yes () No ()
		(2) Showing favouritism in discharging his du		Yes () No()
	b)	If yes please give details of the case/cases (1)Has there been any preliminary finding reg Practices of the officer	arding the corrupt	Yes () No()
		(2) Has any case of corruption on the officer by Vigilance department after preliminary and If 'Yes' give details		Yes () No()
3.		er the Employee requires any training for the put i job or for any higher responsibilities	rpose of his	Yes () No()
4.		er the employee should be possible some other swork or for the other reasons (to be specified)	section office for	Yes () No()
	Ε	Date:	Signature of the	Reporting Officer:
			Name:	
			Designation:	
Re	marks of	the reviewing officer/authority		
Do	you agre	ee with the Assessment made by The Reporting	Officer	Yes () No()
If you wish to modify anything or add please elaborate:		to modify anything or add please elaborate:	Signature of The reviewin	g Officer/Authority:
			Name:	
	Date:		Designation:	

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Which	ou know of any physical disability or health problem n prevents this officer from working to full capacity? please explain the nature of the problem	Yes (() No ()		
(2) Comment with special reference to:					
a	a) The adverse remarks passed against the employee within the course of his performance or the disciplinary action taken against him during the period under report.				
t	b) The effort made to improve the functioning of the employee where his performance with reference to the factors encountered in this report is considered not up to Mark or poor.				
c	c) The important requirement of factors which affect the effectiveness of the work of the officer such as special difficulties and handicapped amount of direct or indirect supervision the emergency demands,				
d	if any, etc.d) Specific instances of any work worthy of being mentioned in support of the assessment in the graphic section.				
(Add separate sheet if necessary) Signature of the Reporting Officer:			eporting Officer:		
		Name:			
Date	e of submission to Reviewing officer:	Designation:			
REM	ARKS OF THE REVIEWING OFFICER/AUTHORITY		section B		
(1) Le	ength of service under him				
Ar	o you agree with the assessment made by the reporting offinything you wish to modify or add please elaborate add separate sheet if necessary)	cer?	Yes () No()		
M	(3) Have the officer any special characters and their any outstanding Merit or abilities which would justify his advisement and special selection for higher appointment out of turn? Yes () No ()				
	Yes' please give details dd separate sheet if necessary) :				
Date:		Signature of The re	eviewing Officer/Authority:		
		Name:			
		Designation:			
	ave read this report gnature of the officer reported upon:				
Da	te:				