

Name of the Employee: _____

Employee Code No : _____

SINHGAD TECHNICAL EDUCATION SOCIETY

P.A.R. - 'A'

Instructions for writing Performance Appraisal Report of Faculty in Technical, Management, Pharmacy, Architecture & Hotel Management Institutes / Colleges & Polytechnic.

Part A: Personal Information (To be written by the Faculty):

1. Information in Part 'A' (Point no. 1 to 34) is to be filled in by the faculty concerned.
2. Personal Information should be submitted to the Head of Department by 15th April of every year.
3. Head of Department on receipt of the Form (Part 'A' duly filled by the faculty) shall verify and correct the same and record certificate to that effect in the space provided.
4. After completion and certification of Part 'A'; Head of Department shall forward it to the Academic Monitoring Committee by 30th April of every year.
5. After assessment of Part 'A' by the Academic Monitoring Committee; photocopy of the same along with the comments of the AMC shall be given to the respective faculty; and receipt thereof shall be obtained from the faculty.

Part B: Performance Appraisal (To be written by the Head of Department):

6. Remarks in Part 'B' (Points no. 1 to 18) of the Reports shall be offered by the Head of Department after Part 'A' is assessed / remarks offered by the Academic Monitoring Committee.
7. While offering remarks in Part 'B', Head of Department shall take into consideration Personal Information given by the faculty and remarks of the Academic Monitoring Committee.
8. While offering remarks in Part 'B', the Head of Department shall select one of the options provided against each item and tick (✓) only one appropriate option as assessment.
9. Wherever options are not provided, Head of Department should write remarks in short and specific clear words.
10. Head of Department should take care that option selected / remarks given against point no. 1 to 16 of Performance Appraisal do not contradict with the point no. 17 and 18 (Overall Assessment and Recommendation respectively)
11. Guidelines for writing Performance Appraisal Report / Special Performance Report should be followed while writing the remarks against points of appraisal.
12. Performance Appraisal Report duly completed in all respect should be submitted to the Principal / Director as the case may be within a week's time.

Part C: Remarks of Principal / Director:

13. Principal / Director as the case may be; shall give justification for his remarks if he is not satisfied with the remarks of Head of Department in Part 'B'.
14. Principal / Director should submit the report duly completed in all respect, to the Founder President / Founder Secretary as the case may be for final review without loss of time so as to complete final review before expiry of Tenure of the faculty / Academic Year.
15. Directors / Principals and Head of Engineering Departments while submitting their own Report; need not fill in the information on the points 9 to 34 in part 'A' of the Report. They however, should highlight self achievements or achievements of institutes / Departments if any during the period of assessment.

SINHGAD TECHNICAL EDUCATION SOCIETY

PERFORMANCE APPRAISAL REPORT FOR FACULTY IN TECHNICAL, MANAGEMENT, PHARMACY, ARCHITECTURE & HOTEL MANAGEMENT INSTITUTES / COLLEGES & POLYTECHNIC.

PART - A

Personal Information (To be filled in by Individual Faculty Member)

(Period of Report: From _____ To _____)

Name of the Institute : - _____ Department: - _____

1. Name : _____
2. Designation : _____
3. Date of Joining : _____
4. Total Experience : _____ Teaching: _____ Industrial: _____
5. Length of service in this Institute: _____ Years _____ Months
6. Date of Birth: _____

7. Status of Appointment (Approval from University / Board, etc.):					Remarks By Academic Monitoring Committee
Approval From	Temporary / Adhoc (on post)	Period of Approval	Permanent (on post)	Conditions for Approval	

8. A) Qualification (Before Reporting Period):					
Degree	Specialization	Year	Division / Grade / Percentage of Marks	Name of Institute / College	University
Graduate					
Post Graduate					
Ph. D / M. Phil or equivalent					
Any Other					

B) Qualification acquired during Reporting Period:					
Degree	Specialization	Year	Division/ Grade / Percentage of Marks	Name of Institute / College	University
Graduate					
Post Graduate					
Ph. D / M. Phil or equivalent					
Any Other					

Remarks By Academic Monitoring Committee

9. FDP / SDP / MDP etc. / Continuing Education Programs / Industrial Training etc. attended:

Title	Arranged by	Date / Duration

10. Participation in Seminar / Workshop / Conference:

	Title	Name of Sponsoring Agency	Paper Presented (Y/N)	Proceedings presented to other faculty / students(Y/N)	Date / Duration
Seminar					
Conference					
Any other activity relating to subject					

11. Seminars / Workshops / Conferences / Courses conducted as Co-ordinator :

	Name	Name of Sponsoring Agency	Place & Date	No. of Participants
Seminar				
Conference				
Workshop				
Courses				

Remarks By Academic Monitoring Committee

12. Consultancy Work and / or Externally Funded Research Projects:

Item	Title	Funding Agency	Amount Sanctioned	Amount Received	Percentage of Completion
Consultancy Work					
Externally Funded Research Projects					

13. A) Research Publications (Research papers located on internet and / or published in International Journals and / or in Proceedings by reputed publishers):

Title of Research Paper	Name of Proceeding / Journal	Name of Co-author	Volume & Year

B) Books Published:

Name	Year of Publication

14. Membership of Professional Bodies:

15. Industrial Liaison:

Name of the Activity	Name of the Industry

Remarks By Academic Monitoring Committee

16. Patents Obtained:

17. (A) Theory Subject taught, Class and Results in % (if declared):

Semester	Class	Subject	%	Class	Subject	%	Class	Subject	%
I									
II									

(B) Weakness in teaching through Students Feedback:

18. Guest Lectures given to outsiders as an Expert:

Title	Institute	Date

19. Participation in (Please give title or short account of contribution):

(a) Departmental Activities: _____

(b) Institutional Activities: _____

(c) Co-Curricular Activities: _____

(d) Community service and promotion of Entrepreneurship and Job Creation: _____

(e) Any other: _____

20. Constraints / Problems if any faced:

Utilization of working hours per week by the faculty for current year
(To be filled in by the Individual Faculty)

Sr. No.	Name of Activity	Hours / Week
21	Average theory load hours allocated per week	
22	Average practical load hours allocated per week	
Total Teaching load of hours per week		
23	Students assessment and evaluation	
24	Laboratory development	
25	Students guidance and counseling	
26	Continuous education activity	
27	Self Technical development (utilization of library, internet etc.)	
28	Industry institute interaction, industrial projects etc.	
29	Guidance for co-curricular and extra-curricular activities of the students	
30	Research and development activity	
31	Consultancy activity	
32	Departmental work (other than specified above)	
33	Institutional work (other than specified above)	
34	Any other	
Total load of hours per week		

Place: _____

Date: _____

Name & Signature of Faculty

- I have personally verified the information given by the Faculty (on points 1 to 34) and duly corrected it.
- Comments whether faculty member has shown improvement in the areas in which deficiencies were observed by the A.M.C. in its last report :- _____

Place: _____

Date: _____

Name & Signature of the Head of Department /
Director With stamp

Overall assessment of the Academic Monitoring Committee: _____

Signature of Member of AMC

CONFIDENTIAL

PART – B

PERFORMANCE APPRAISAL (To be filled in by the Head of Department)

I. GENERAL

Sr. No.	Item of Assessment	Grade of Performance Assessment			
		Very Good	Good	Average	Below Average
1	Quality of Job / Accuracy	Very Good	Good	Average	Below Average
2	General Intelligence	Very Good	Good	Average	No Comments
3	Integrity and Character	Good		Not Good	No comments
4	Reliability / Dependability	Yes	Partly	No	No comments
5	Punctuality	Yes		No	
6	Fitness to continue in the present position	Yes		No	
7	Relation with Colleagues / Students and their Parents	Co-operative	Courteous	Indifferent	Unfriendly

8. Brief about Punishments / Rewards if any during the period of Report: _____

II. ACADEMIC

9	Control over class and discipline	Very Good	Good	Average	No Control
10	Students feed back	Very Good	Good	Poor	(Any other remarks)
11	Proficiency in subject of Specialization	Very Good	Good	Average	Below Average
12	Initiative to do work	Very Good	Good	Average	Below Average
13	Organizing ability	Very Good	Good	Average	Below Average

14. Involvement in conducting & arranging communication skills / personality development / value addition programmes. _____

15. Efforts taken to overcome weaknesses in Teaching, if any:

Yes	No	Not Applicable
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16. Leave Without Pay Availed during the period of assessment: _____

17. Overall Assessment:

Very Good	Good	Average	Below Average
A	B	C	D

18. Recommendations, if any _____

Place: _____
Date: _____

Name & Signature of HOD/Director with Stamp

6.3.5

PART - C

**Remarks of Principal / Director
(To be filled in by Principal / Director)**

1. Length of service under Principal / Director : From To

2. A. Do you agree with the assessment made by the:
Head of Department

Yes	No	If No, Specify grade

B. If not; state specific remarks for not agreeing

Place: _____

Date: _____

Name of Principal / Director Signature & with Stamp

PART - D

FINAL REVIEW BY THE ACCEPTING AUTHORITY

a. Accepted :

b. Not Accepted :

c. Any other remarks : _____

d. Final Gradation of the Employee :

Very Good	Good	Average	Below Average
A	B	C	D

Date: _____

PRESIDENT / SECRETARY



Sinhgad Institutes

SINHGAD TECHNICAL EDUCATION SOCIETY

Non Teaching Performance Appraisal Report

Employee Code: _____

Name in Full: _____ Designation: _____

College / Institute: _____ Campus: _____

Joining date (STES): _____ Joining date (College/Institute): _____

Period of Assessment: From _____ to _____

Summary of the Performance

Assessment Head	Maximum marks	Marks obtained by employee	Remarks
Service Record	35		
Knowledge	4		
Communication (Written & Oral)	4		
Supervisory ability	5		
Initiative & Co-operation	20		
Quality of Work	32		
Total	100		

Performance Indicator (PI) of Current Year : _____

Comments & Recommendations of Principal/ Director: _____

(Name, Sign & Stamp)

Final Review of the Accepting Authority: _____

PRESIDENT / VICE-PRESIDENT / SECRETARY

Sr. No.	Parameter/Criteria	Value to be filled by employee	Maximum Score	Self Evaluation by employee	Evaluation by HOD / Reporting Officer
1	Service Record		35		
1.1	% Attendance during actual teaching days in Academic Year (Present days/total teaching days) x 100 > 90% = 10, 85 to 90% = 8, 80 to 84% = 6, 75 to 79 = 4 < 75% = 0		(10)		
1.2	No. of late comings in Academic year ≤ 24 = 4, > 24 = 0		(4)		
1.3	No. of times the CL/C. off availed in conjunction with holidays in Assessment Period ≤ 2 times = 3, > 2 times = 0		(3)		
1.4	No. of times the ELs availed in one year ≤ 3 times = 2, > 3 times = 0		(2)		
1.5	No. of times the Medical leaves availed in one year ≤ 2 times = 2, > 2 times = 0		(2)		
1.6	No of days as LWP in one year 0 days = 3, ≤ 5 days = 2, > 5 days = 0		(3)		
1.7	Whether available on days when important events/work happened in Dept/College Always available = 2, Not available once = 1, Not available more than once = 0		(2)		
1.8	No. of times the leaves were not pre-sanctioned 0 times = 2, ≤ 2 times = 1, > 2 times = 0		(2)		
1.9	No. of CL balance after 1 year > 2 balance = 3, 2 balance = 2, 1 balance = 1, 0 balance = 0		(3)		
1.10	Outcome of Feedback obtained from colleagues, staff & faculty.		(4)		
2	Knowledge		4		
2.1	Whether competent in required job skills & knowledge		(1)		
2.2	Whether exhibits ability to learn & apply new skills		(1)		
2.3	Whether Displays understanding of how job relates to others		(1)		
2.4	Whether uses resources effectively		(1)		
3	Communication (Written & Oral)		4		
3.1	Whether expresses ideas & thoughts well verbally		(1)		
3.2	Whether expresses ideas & thoughts well in written form		(1)		
3.3	Whether exhibits good listening & comprehension		(1)		
3.4	Whether keeps others adequately informed		(1)		
4	Supervisory ability		5		
4.1	Ability to effectively provide direction, support and watching subordinates		(2)		
4.2	Whether responds to the instructions, guidelines, from higher authorities		(3)		

5	Initiative & Co-operation	20		
5.1	Whether following protocols/hierarchy in office matters	(2)		
5.2	Frequency of complains to higher authorities about colleagues	(1)		
5.3	Ability to do work with minimum instructions	(2)		
5.4	Ability to identify requirements of the work assigned	(1)		
5.5	Maintaining daily cycle of duties	(2)		
5.6	Whether displays positive outlook in pleasant manner with co-workers, faculty, staff, students, parents and public in general	(6)		
5.7	Involvement in work/duties at Institute level	(3)		
5.8	Whether positive and flexible approach to work requirements as per situations	(3)		
6	Quality of Work	32		
6.1	Promptness (Timely completion of work)	(6)		
6.2	Accuracy	(6)		
6.3	Any outstanding work done	(6)		
6.4	Integrity & honesty towards work and organization	(6)		
6.5	Any efforts being made for academic qualification improvement	(2)		
6.6	Punishment warnings / memos received if any Received None = 3, Received once = 1, More than once = 0	(3)		
6.7	Appreciation received if any Received None = 0, Received once = 1, More than once = 3	(3)		
*		100		

Place & Date: _____

(Signature of employee)

Comments & Recommendations of Reporting Officer/HOD: _____

(Name Sign & Stamp)



Sinhgad Institutes

SINHGAD TECHNICAL EDUCATION SOCIETY

सिंहगड टेक्निकल एज्युकेशन सोसायटी

Non Teaching Performance Appraisal Report

शिक्षकेतर कर्मचा-यांच्या कामगिरीचा मूल्यमापन अहवाल

Employee Code: _____

कर्मचारी क.

Name in Full: _____ Designation: _____

संपूर्ण नाव

पद / हुद्दा

College / Institute: _____ Campus: _____

महाविद्यालय / संस्था

संकुल

Joining date (STES): _____ Joining date (College/Institute): _____

रूजू झाल्याची तारीख (एस .टी .ई .एस .)

रूजू झाल्याची तारीख (महाविद्यालय / संस्था)

Period of Assessment: From _____ to _____

मूल्यांकन कालावधी

पासून

पर्यंत

Summary of the Performance

कामगिरीचा सारांश

Assessment Head मूल्यांकन अधिकारी	Maximum marks जास्तीत जास्त गुण	Marks obtained by employee कर्मचा-याने प्राप्त केलेले गुण	Remarks शेरा
Service Record सेवा नोंदी	50		
Interpersonal Relations आंतरव्यक्तिक संबंध	8		
Initiative & Co-operation पुढाकार आणि सहकार्य	9		
Quality of Work कामाची गुणवत्ता	33		
Total एकूण	100		

Performance Indicator (PI) of Current Year : _____

कामगिरी निर्देशक

Comments & Recommendations of Principal/ Director: _____

प्राचार्य / संचालकांच्या टिप्पण्या आणि शिफारशी

(Name, Sign & Stamp)

नाव , स्वाक्षरी आणि मुद्रांक (शिक्का)

Final Review of the Accepting Authority: _____

स्वीकार करणा-या अधिका-यांचे अंतिम पुनरावलोकन

PRESIDENT / VICE-PRESIDENT / SECRETARY

अध्यक्ष / उपाध्यक्ष / सचिव

Sr. No. अ.क	Parameter/Criteria घटक / निकष	Value to be filled by employee कर्मचा-यांनी भरावयाचे मूल्यांक	Maximum Score जास्तीत जास्त गुण	Self Evaluation by employee कर्मचा-याचे स्वयं मूल्यमापन	Evaluation by HOD / Reporting Officer विभागप्रमुख अहवाल अधिका-यांनी केलेले मूल्यमापन
1	Service Record सेवा अभिलेख		50		
1.1	% Attendance during actual teaching days in Academic Year (Present days/total teaching days) x 100 > 90% = 10, 85 to 90% = 8, 80 to 84% = 6, 75 to 79 = 4 < 75% = 0 शैक्षणिक वर्षामध्ये प्रत्यक्षरित्या अध्यापनाच्या दिवसांमध्ये उपस्थितीचे शेकडा प्रमाण (उपस्थित दिवस / एकूण अध्यापनाचे दिवस) X 100		(10)		
1.2	No. of late comings in Academic Year ≤ 24 = 4, > 24 = 0 शैक्षणिक वर्षामध्ये उशिरा आलेल्या दिवसांची संख्या		(4)		
1.3	No. of times the CL/C. off availed in conjunction with holidays in Academic Year ≥ 3 times = 2, 2 times = 3, 1 time = 4, 0 time = 5 सुट्यांना जोडून रजा / सी ऑफ चा लाभ वर्षभरात किती वेळा घेतला ?		(5)		
1.4	No. of times the ELs availed in Academic Year > 3 times = 1, > 2 times = 2, 2 times = 4 वर्षभरात घेतलेल्या अर्जित रजांची संख्या		(4)		
1.5	No. of times the Medical leaves availed in Academic Year ≤ 2 times = 3, > 2 times = 0 एका वर्षात घेतलेल्या वैद्यकीय रजांची संख्या		(3)		
1.6	No of days as LWP in Academic Year 0 days = 3, ≤ 5 days = 1, > 5 days = 0 एका वर्षात वेतनाशिवाय घेतलेल्या रजांची संख्या		(3)		
1.7	Whether available on days when important events / work happened in Dept / College Always available=5, Not available once=3, Not available more than once = 0 महाविद्यालय / विभागातील महत्वाचे प्रसंग, घटना, काम यावेळी उपलब्ध होता का ? नेहमी उपलब्ध = ५, एकदा उपलब्ध नाही = ३, एका पेक्षा जास्तवेळा उपलब्ध नाही = ०		(5)		
1.8	No. of times the leaves were not pre-sanctioned 0 times = 4, ≤ 2 times = 3, > 2 times = 2, > 3 times = 0 पूर्व मंजूरी शिवाय घेतलेल्या रजांची संख्या ० वेळा = ५, < २ वेळा = ३, > २ वेळा = ०		(4)		
1.9	No. of CL balance after 1 year > 2 balance = 5, 2 balance = 4, 1 balance = 3, 0 balance = 0 एका वर्षानंतर शिल्लक असलेल्या किरकोळ रजांची संख्या > २ शिल्लक = ५, २ शिल्लक = ४, १ शिल्लक = ३, ० शिल्लक = ०		(5)		
1.10	Outcome of Feedback obtained from colleagues, staff & faculty. सहकारी, कर्मचारी व प्राध्यापक यांच्याकडून मिळालेल्या अभिप्रायांचा परिणाम		(7)		
2	Interpersonal Relations आंतरवैयक्तिक संबंध		8		
2.1	Whether following protocols/hierarchy in office matters आपण कार्यालयातील नियम, पद्धती / उतरंड यांचे पालन करता का ?		(1)		
2.2	Frequently of complaints to higher authorities about colleagues उच्च अधिकार्यांकडे सहकार्यांवद्दल केलेल्या तक्रारीची वारंवारता		(2)		
2.3	Sensitive to work assistance asked by co-worker सहका-यांनी मदतीसाठी विचारणा केलेल्या कामावद्दलची संवेदनशीलता		(2)		
2.4	Whether displays positive outlook in pleasant manner with co-workers, faculty, staff, students, parents and public in general सर्वसाधारणपणे आपले सहकारी, कर्मचारी, प्राध्यापक, विद्यार्थी, पालक आणि इतर लोकांशी आनंददायी पद्धतीने दृष्टीकोन सकारालक दृष्टीकोन दाखविता का ?		(3)		

3	Initiative & Co-operation पुढाकार आणि सहकार्य	9		
3.1	Ability to do work with minimum instructions कमीत कमी सूचनांद्वारे काम करण्याची पात्रता	(2)		
3.2	Ability to identify requirements of the work assigned नेमून दिलेल्या कामाची आवश्यकता ओळखण्याची पात्रता	(1)		
3.3	Maintaining daily cycle of duties दैनंदिन कर्तव्यांची पालिका व्यवस्थितपणे पार पाडणे.	(2)		
3.4	Working cordially with colleagues सहका-यांवरोबर सलोख्याने काम करणे	(2)		
3.5	Involvement in work/duties at Institute level संस्था स्तरावरील काम / कर्तव्यांमध्ये सहभाग	(2)		
4	Quality of Work कामाची गुणवत्ता	33		
4.1	Promptness (Timely completion of work) तत्परता (वेळेत काम पूर्ण करणे)	(5)		
4.2	Accuracy अचूकता	(5)		
4.3	Any outstanding work done during year वर्षभरात आपण केलेले कोणतेही उल्लेखनीय काम	(5)		
4.4	Integrity & honesty towards work and organization काम व संस्थेच्या प्रति सचोटी व प्रामाणिकपणा	(5)		
4.5	Any efforts being made for academic qualification improvement/skill enhancement शैक्षणिक पात्रता वाढीसाठी / कौशल्य वाढविण्यासाठी काही प्रयत्न केले असल्यास	(2)		
4.6	Punishment warnings / memos received if any (in written form) Received None = 4, Received once = 2, More than once = 0 काही शिक्षा (कडक इशारा / मेमो) प्राप्त झाला असल्यास	(4)		
4.7	Appreciation received if any (in written form) Received None = 0, Received once = 2, More than once = 4 कोतुक / प्रशंसा प्राप्त झाली असल्यास काहीही प्राप्त नाही = 0, एकदा प्राप्त = २, एकापेक्षा जास्त वेळा प्राप्त = ४	(4)		
4.8	Consumption of banded substances on college premises or while on duty elsewhere महाविद्यालयाच्या परिसरात किंवा इतरत्र कामानिमत असताना बंदी घातलेले पदार्थ सेवन करता का ?	(3)		
		100		

Place & Date: _____

स्थळ आणि दिनांक

(Signature of employee)

(कर्मचा-यांची स्वाक्षरी)

Comments & Recommendations of Reporting Officer/HOD: _____

अहवाल अधिकारी / विभागप्रमुखांच्या टिप्पण्या आणि शिफारशी

(Name Sign & Stamp)

नाव स्वाक्षरी मुद्रांक (शिक्का)