

APAR Form No-1

दिल्ली राज्य औद्योगिक एवं अवसंरचना विकास निगम लिमिटेड,
बॉम्बे लाइफ बिल्डिंग, एन-ब्लॉक, कनॉट सर्कस नई दिल्ली-1

Delhi State Industrial & Infrastructure Development Corporation Ltd.
Bombay Life Building, 'N' Block Connaught Circus, New Delhi-1

वार्षिक कार्यनिष्पादन मूल्यांकन प्रतिवेदन

Annual Performance Assessment Report For Multi- Tasking Staff

PART – 1

To be filled by the Personnel Section concerned of the DSIIDC

1. Name of officer.....

2. Date of Birth..... In Words.....

3. Date of continuous appointment to the present grade:

Date.....

Grade.....

4. Present post and date of appointment thereto:

Post.....

Date.....

5. Period of absence from duty (on training leave etc.) during the year. If he has undergone training, specify

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.....

6. Reporting & Reviewing authorities :

Authority	Name	Designation	Period	
			From	To
Reporting Authority				
Reviewing Authority				

Date:

Place:

Signature on behalf of Personnel Dept.

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PART – 2

(To be filled in by the Officer reported upon)

1. Brief Description of duties

2. Brief resume of the work done by the officer reported upon during the period

3. Please state whether the annual return on immovable property for the preceding calendar year was filled within the prescribed date i.e. 31st January of the year following the calendar year. If not, the date of filling the return should be given.

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Date:

Signature of officer reported upon

PART 3 – ASSESSMENT BY THE REPORTING OFFICER

(Please read carefully the guidelines before filling the entries)

1. Numerical grading is to be awarded for each of the attribute by the reporting authority which should be on a scale of 1-10, where 1 refers to the lowest grade and 10 to the highest.

(A). Assessment of work Output/ functional competency (weightage to this Section would be 40%).

Sl. No.	Attributes	Reporting Authority	Reviewing Authority	Initials of Reviewing Authority
	1	2	3	4
1	Accomplishment of planned work/work Allotted			
2	Quality of work			
3	Handling of Dak and Correspondences			
4	Efficient and prompt handling of phone Calls			
5	Proficiency in handling of office equipment such as photocopier, fax machine, printers, CCTV etc.			
	Overall Grading on Work Output Total (1 to 5)/5			

(B).Assessment of personal attributes (weightage to this Section would be 30%).

Sl. No.	Attributes	Reporting Authority	Reviewing Authority	Initials of Reviewing Authority
	1	2	3	4
1	Attitude to work			
2	Sense of Responsibility			
3	Maintenance of discipline			
4	Communication Skills and coordination ability			
5	Ability to work in team			
6	Analytical ability			
7	Ability to meet deadlines			
8	Inter-personal relations			
	Overall Grading on Personal Attributes Total Score (1 to 8)/8			

(c). Assessment of functional competency (weightage to this Section would be 30%).

Sl. No.	Attributes	Reporting Authority	Reviewing Authority	Initials of Reviewing Authority
	1	2	3	4
1	Knowledge of Rules/regulations/procedures in the area of function and ability to apply them correctly			
2	Planning ability			
3	Coordination ability			
	Overall Grading on functional competency Total Score (1 to 3)/3			

Note: The overall grading will be based on addition of the mean value of each group of indicators in proportion to weight age assigned.

PART - 4

General

1. Relations with the public (wherever applicable) :

(Please comment on the Officer's accessibility to the public and responsiveness to their needs.)

2. Training :

(Please give recommendations for training with a view to further improving the effectiveness and capabilities of the Officer)

3. State Of Health :

4. Integrity :

(Please comment on the integrity of the officer)

5. Pen picture by Reporting Officer. Please comment (in about 100 words) on the overall qualities of the officer including areas of strengths and lesser strengths and his attitude towards weaker sections.

6. Overall numerical grading on the basis of weightage given in Part-3 of the Report

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Place:

Date :

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Signature of Reporting Authority

Name & Designation.....

Designation During the period of report.....

Part - 5

1. REMARKS OF THE REVIEWING OFFICER:

Length of Service under the reviewing Officer

2. Do you agree with the assessment made by the reporting officer with respect to the work output and the various attributes in Part-3 & Part-4?

Yes/No.....

3. In case of disagreement, please specify the reasons. Is there anything you wish to modify or add?

4. Pen picture by Reviewing Officer. Please comment (in about 100 words) on the overall qualities of the officer including area of strengths and lesser strength and his attitude towards weaker sections.

5. Overall numerical grading on the basis of weightage given in Part-3 of the report.

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Place :

Date:

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Signature of Reviewing Authority

Name & Designation.....

Designation During the period of review.....