

STATE COUNCIL OF EDUCATIONAL RESEARCH & TRAINING

(An autonomous Organization of Education Department, GNCT of Delhi)

VARUN MARG, DEFENCE COLONY, NEW DELHI – 110024

ANNUAL PERFORMANCE APPRAISAL REPORT

PERIOD: FROM -----TO-----

(Information provided should pertain to the period referred above)

PART-A: GENERAL INFORMATION AND ACADEMIC BACKGROUND

1. Name (In Block Letters) :
2. Father's/Mother's Name :
3. Date of Birth :
4. Designation :
5. Place of Posting :
6. Category (SC/ST/OBC/PWD/General) :
7. Date of entry into service in SCERT :
8. Date of present Level/Designation with
Academic level :
9. Date of posting in present place of posting :
10. Date of eligibility for promotion :
11. Last rejection in the current AGP/Academic
level If any :
12. Date of Retirement :
13. Field of specialization under the Subject/
Discipline :
14. Any other relevant information :

Signature of Officer Reported upon

PART-B: ACADEMIC PERFORMANCE ASSESSMENT

1. Teaching Activity :

S.No.	Level (D.El.Ed./DPSE)/B.Ed.	Year	Paper	Teaching Mode	Lecturers/Tutorials/ Practical/Other Related activities		% Of Assigned Classes Taught
					Classes Assigned	Classes Taught	

2. Student related activities:

a) Administrative Responsibilities:

S.No.	Nature of Activiy	Designation	Institution/Department	Period	
				From	To

b) Examination and Evaluation:

S.No.	Nature of Activiy	Designation	Institution/Department	Period	
				From	To

Signature of Officer reported upon:

c) Student related co-curricular, extension and field based activities such as student clubs, career counseling, study visits, student seminars and other events, cultural, sports and community service:

S.No.	Nature of Activiy	Designation	Institution/ Department	Period	
				From	To

d) Organising Seminars/Conferences/Workshops:

S.No.	Theme/Name of The Program	Beneficiaries/ stakeholders	Duration of the Program	Venue of the Program	Acted as	Period	
						From	To

e) Organising INSET:

S.No.	Theme/Name of The Program	Beneficiaries/ stakeholders	Duration of the Program	Venue of the Program	Acted as	Period	
						From	To

Signature of Officer reported upon:

f) Conducting minor or major Research Project:

S. No.	Title	Minor/ Major	Sponsoring/ Funding Agency	Role in the Project	Status of the Project (completed/ Under Progress)	Publication Status

*Please specify the reasons, if the research project is not completed in time

g) Material/content Development:

S. No.	Title	Minor/ Major	Sponsoring/ Funding Agency	Role in the Project	Status of the Project (completed/ Under Progress)	Publication Status

h) Research Papers/Publications in peer-reviewed or UGC list of Journals or SCERT Delhi Journal:

S. No.	Title of the Paper	Journal Name	Year / Vol. No./ Page No.	ISSN No./ ESSN No.	No. of Co-Authors	Whether 1 st Author/ corresponding Author	Impact factor, If any	Whether Journal Listed in UGC Care List/ Web of Science? Scopus or not	Whether Journal is Peer-Reviewed / listed in rejected list/ old list UGC S.No./ SCERT Delhi Journal

Signature of officer reported upon:

i. Any other contribution:

Signature of Officer reported upon

PART-C: GENERAL REMARKS OF THE REPORTING OFFICER

Name of the Reporting Officer :

Designation of the Reporting Officer :

Length of the service under Reporting Officer :

(during the year under reference)

1. Relation with the Stakeholders:
(Please comment on the officer's accessibility to the stakeholders and responsiveness to their needs)

2. Training:
(Please give recommendations for training with a view to improving the effectiveness and capabilities of officer)

3. State of Health:

4. Integrity:
(Please Comment on the integrity of the Officer)

5. Do you agree with the work done by the officer as indicated at Part-B:

<p>6. Pen picture by Reporting Officer on the overall qualities of the officer including area of strength and lesser strength, extraordinary achievements significant failures and attitude towards his work (in not more than 100 words):</p>
<p>7. Grading as per achievements mentioned at Sl. No. 1 and 2 of Part-B:</p> <p style="padding-left: 40px;">Grading for Sl. No. 1 of Part-B:</p> <p style="padding-left: 40px;">Grading for Sl. No. 2 of Part-B:</p>
<p>8. Name and Designation of Reviewing Officer:</p>
<div style="text-align: right; margin-bottom: 10px;">Signature of Reporting officer</div> <div style="text-align: center;"> <p>Name (in BLOCK letters):</p> <p>Designation during the period of Report:</p> <p>Department:</p> </div> <p>Place:</p> <p>Date:</p>

PART-D: REMARKS OF THE REVIEWING OFFICER

Name of the Officer reported upon :

Designation of the Officer reported upon :

Period of Report :

<p>1 Length of the service under Reviewing Officer:</p>

2 Do you agree with the assessment made by the reporting officer with respect to the work output and the various attributes in Part-B? In case you do not agree with any of the attributes please record your assessment.

3 In case of disagreement, please specify the reasons.

4 Pen picture by Reviewing Officer. Please comment on the overall qualities of the officer including are of strength and lesser strength and his attitude towards his work (in not more than 100 words).

5 Do you agree with the grading given by the Reporting officer in Part-B:

6 Grading as per achievements mentioned at Sl. No. 1 and 2 of Part-B:

Grading for Sl. No. 1 of Part-B:

Grading for Sl. No. 2 of Part-B:

Signature of Reporting officer

Name (in BLOCK letters):

Designation during the period of Report:

Department:

Place:

Date:

GUIDELINES FOR GRADING OF APAR

1 . Grading for S.I. no. 1 of Part B :

- | | | |
|-----|---------------------------|---------------------------|
| I | 80% & above | - Good |
| II | Below 80% but 70% & above | - Satisfactory |
| III | Less than 70% | - Not satisfactory |

2 . Grading for S.I. no. 2 of Part B :

- | | | |
|-----|---|---------------------------|
| I | Involved in at least 3 activities | - Good |
| II | Involved in 1-2 activities | - Satisfactory |
| III | Not involved/undertaken any of the activities | - Not Satisfactory |

Note: Number of activities can be within or across the broad categories of activities

Note: For the purpose of assessing the grading of Activity at Serial No. 1 and Serial no. 2, all such periods of duration which have been spent by the faculty on different kinds of paid leaves such as Maternity leave, Child Care Leave, Study Leave, Medical Leave, Extraordinary Leave and Deputation shall be excluded from the grading assessment. The faculty shall be assessed for the remaining period of duration and the same shall be extrapolated for the entire period of assessment to arrive at the grading of the teacher. The faculty on such leaves or deputation as mentioned above shall not be put to any disadvantage for promotion under CAS due to his/her absence from his/her teaching responsibilities subject to the condition that such leave/deputation was undertaken with the prior approval of the competent authority following all procedures laid down in these regulations and as per the acts, statutes and ordinances of the parent institution.