# FORMS OF PERFORMANCE REPORT OF COLLEGE LECTURERS (PART TIME & CASUAL TEACHING FACULTY)

Reporting for the year ending : **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# PERSONAL DATA

1. Name :
2. Designation :
3. Place of Posting :
4. Date of Birth :
5. Whether the officer belongs to ST/SC :
6. Date of Appointment/joining the present post : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Period of absence from duty to leave etc. :

Signature of Government Servant

# ASSESMENT OF THE REPORTING OFFICER

1. State of Health :
2. Punctuality in attendance :
3. Integrity :
4. General assessment of personality, character and temperament including relation with

fellow employees :

1. Grading **(Outstanding/Very Good/Average/Below Average)**

(An officer should not be granted outstanding unless exceptional qualities and performance have been noticed, grounds forgiving such a grading should clearly be brought out)

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Reporting Officer/HOD : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name in Block Letters : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# (REMARKS OF ACCEPTING AUTHORITY)

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_

Place: Signature of Accepting : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authority/Principal

Name in Block Letters : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Seal :