# Annual Confidential Report (SIASTE) for the year......

## (For Assistant/Associate Professors)

To be filled up by Employee.

1.	Pa	rticulars	
	a.	Name	
	b.	Father Name	
	C.	Employee ID	
	d.	Date of Birth	
	e.	Qualifications	
	f.	Designation	
	g.	Teaching Subject	
	h.	Date of Joining servi	ce
	i.	Mode of Recruitment	
	j.	Date of Joining at pr	esent posting
	k.	Place of previous po	sting with teaching subject
			From To
	L.	Area of specialization	of Research

2. Teaching Performance

a. Results

Sr	Session	Exam/Class	Subject	Student	Student	College	University	Difference
No.			Taught	Appeared	Passed	Pass	Pass	
						Percentage	Percentage	

2. (b) Responsibility of the Assistant/Associate Professor in case of lower percentage than the pass percentage of the University Results.....

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#### 3. Academic Competence/Teaching Methodology

- a. Whether Subject Courses were Completed on time?.....
- b. Use of ICT resources, tools and technology viz. smart class room, LMS, e-Contents.....
- c. Use of books/materials other than textbooks.....
  d. Outstanding contribution/good practices, if any.....

any)		
5. Profe		progress during the year
	a. Hig	pher qualification acquired, if any
	b. Re	search work, if any
	i)	Particulars of papers presentation in national/international Seminars/Conferences
	ii)	Detail of research papers published in peer reviewed/UGC care
	iii)	list/ Scopus formats Attended any workshop/Faculty development programme
	c De	tails of in service training (Orientation and Refresher Courses/ any
		ort term course attended)
	d. Aw	ards, if any
6 Cont	ribution	to other activities of College
o. com	255	to other activities of College
		mmittees as Incharge/Member
		······
	h Ac	member of Academic bodies (BOS, AC, EC, Curriculum Department

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c. Whether Remedial and extra
Classes taken for weaker students?
d. Any other achievements
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7. Whether indulges in any private Tuitions/Coaching?
8. Whether he/she stays at HQ after college hours and during the
holiday's?
9. Whether Courses for academic year were completed?
10. Have you done Annual Medical Checkup?(if yes)
a. Date of Medical Checkup
b. Hospital Name
11. Property Return (Mention date and attach copy)
12. Any other plus point not mentioned above
13. No. of Working Days spent in College
a. For Admission
b. For Teaching
c. For Evaluation
d. For invigilation/Examination
e. For Career Activities- Specify
f. Total Working Days

Date:

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(Assistant/Associate Professor's Signature)

### Appraisal by Authorities

### (To be filled up by the Director of SIASTE)

1. Facts based point wise information filled up by employee from point no.1 to 13 to be verified from the record whether correct or not.

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2. Whether official engages in Private
Coaching/tuitions?
3. Whether official maintains HQ or not?
4. Attitude towards Work
5. Sense of Responsibility
6. Communication Skills
7. Emotional Stability
8. Overall bearing and Personality
9. Moral Courage
10. Integrity
11. Willingness to take a professional
Stand
12.Leadership qualities
13.Capacity to work in time limit
14.Team work and relations with
colleagues and Head of Institution
15.Whether official takes initiative?
16. Treats Students with dignity,
respect & fairness
17. Encourages students for open
exchange of ideas
18. Positive behaviour in classroom
19. Takes cognizance of student's
diversity and identifies their

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individual learning needs
20. Delivers planned lessons in the class
using appropriate instructional
strategies in subject/teaching area
21. Able to identify and use
appropriate resources, tools and
technology for learners
22. Use of ICT and LMS in teaching and learning
23. Assessment of student learning
using different types of assessment
strategies and tools to meet the
requirements of the curriculum
24. Student rating of faculty member (if any)
25. Pen picture of the employee
by the Administrative Head of the Institution
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### 26.Overall Assessment:

(Keeping in view all the above facts)

- A. Outstanding
- B. Very Good
- C. Good

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- D. Average
- E. Below Average

(Director SIASTE to fill up all the columns and no column is to be left blank)

Date.....

Signature of Reporting Officer with stamp

27. Remarks by the next Higher Authority/Second Reporting Officer/Reviewing Officer:

28. Whether any enquiry/complaint is pending?

29. Punishment if any awarded:

Dated:....

(Joint Director Admin.) (Head Quarter)

30. Remarks by the Final Reporting Officer/Accepting Authority:

Dated.....

Director General, Higher Education Haryana