

**Emp. Code:** \_\_\_\_\_

**GOVERNMENT OF INDIA  
MINISTRY OF COMMUNICATIONS & INFORMATION TECHNOLOGY  
DEPARTMENT OF INFORMATION TECHNOLOGY  
NATIONAL INFORMATICS CENTRE**

**ANNUAL PERFORMANCE REPORT**

(For all Scientists of and above the grade of Scientific Officer/Engineer Grade 'SB')

***Note: Please ensure that there is no overwriting under any column.***

**PART - I**

**PERSONAL DATA**

1. Name \_\_\_\_\_
2. Period of Report \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_
3. Date of Joining \_\_\_\_\_
4. Designation \_\_\_\_\_
5. Date of appointment to the present grade \_\_\_\_\_
6. Present Pay Scale \_\_\_\_\_ Present Basic Pay \_\_\_\_\_
7. Period of absence from duty (On leave, training etc. during the period under report. If undergone training, please specify) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Academic Qualifications \_\_\_\_\_

**PART - II**

**SELF-APPRAISAL REPORT**

(To be filled in by the Officer Reported upon)

1. Name of the Group/Division to which the officer was assigned during the year

---

---

2. Area of activities assigned (including number of projects assigned to you)

---

---

3. Summary of the projects completed during the year

---

---

---

---

---

---

---

---

---

---

**(Please use additional sheet if necessary, not exceeding two sheets)**

4. Any other major activities

---

---

---

---

---

5. Significant achievements and contribution

---

---

---

---

6. Please state briefly any bottlenecks or constraints which might have affected your professional productivity and suggestions to remove the same

---

---

---

---

---

---

---

---

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

(Signature)

**PART - III****ASSESSMENT BY THE REPORTING OFFICER**

Name of the officer whose CR is being assessed \_\_\_\_\_

Designation \_\_\_\_\_

Length of Service under  
the Reporting Officer \_\_\_\_\_ Year(s) \_\_\_\_\_ Month(s)

**A. Assessment of personality**

	Grade	Remarks
1. Professional Knowledge :		
(i) Depth		
(ii) Breadth		
(iii) Capability to upgrade		
2. Degree of perception & Conceptualisation		
3. Analytical Ability		
4. Self-confidence		
5. Technical Coordination		
6. Communication skill		
(i) Oral		
(i) In writing		
7. Objectivity		

	Grade	Remarks
8. Administrative judgment and foresight		
9. Organisational ability		
10. Initiative		
11. Dependability		
12. Sense of Responsibility		
13. Human Relations		
14. Integrity		

**Overall Grade:**

A+ (Outstanding)	A (Very Good)	B+ (Good)	B (Average)	C (Poor)
---------------------	------------------	--------------	----------------	-------------

*(Tick the appropriate Grade and Initial)*

**B. General Performance**

- Please comment on "Self Appraisal Report" submitted by the officer in Part II and state whether you agree with the details therein. In particular, please indicate whether you agree with the bottlenecks and constraints mentioned by the officer. If so, what steps would you like to suggest to reduce/eliminate the same in order to improve overall productivity of the officer.

---

---

---

---

---

---

---

---

---

---

2. Any other general remarks/special attributes of the officer about which you may like to make a special mention

---

---

---

---

---

3. Any adverse remarks/weak points of the officer. Also indicate whether these were communicated to the officer. If so, when and whether any improvement has been noticed in the performance of the officer as a result of this communication.

---

---

---

---

4. Recommendations  
[Please tick mark (✓) any one]

Deserves incentive for outstanding performance	<input type="checkbox"/>
Fit for Retention	<input type="checkbox"/>
Needs to be guided for improving performance	<input type="checkbox"/>
Not fit for retention	<input type="checkbox"/>

(Signature of Reporting Officer)

Name \_\_\_\_\_  
(in Block letters)

Date :

Designation \_\_\_\_\_

**PART - IV**

**REPORT OF THE REVIEWING OFFICER**

1. Do you agree with the assessment given by the Reporting Officer? Please indicate whether you would like to modify or add anything to this report :

---

---

---

---

---

---

---

---

2. What action would you like to take on the recommendation of the Reporting Officer in column 4 of Part III(B).

---

---

---

---

---

---

---

---

(Signature)

Name \_\_\_\_\_  
(in Block letters)

Date :

Designation \_\_\_\_\_