Annual Performance Assessment Report (APAR)

For

Nagaland Govt. Servants (Group C Employees)

For the year/period.....

FORMAT OF ANNUAL PERFORMANCE ASSESSMENT REPORT (APAR) FOR GROUP C EMPLOYEES

Annual Pe	rformand	ce Asses	ssment Repo	ort from		to _		
			SE	CTIO	N ₋ I			
				c Infor				
			(To be filled	in by t	he Employe	ee)		
1. Name of the I		e						
2. Service/Depart	rtment							
3. Date of Birth								
4. Date of entry	into Gov	ernmen	t Service					
5. Grade/Post (D	Ouring th	e period	l of report)					
6. Date of appoin	ntment to	o the pre	esent post					
7 D	. • . • .	. 0 4		1				
7. Reporting, R Authorit		g & Acc	Name & o				Perio	od Worked
						From	-	То
Reporting Author	ority							
Reviewing Auth	ority							
Accepting Author	ority							
8. Period of Ab	sence:							
	I	From	7	Го	Γ	уре		Remarks
On Leave								
Others								
9 Training Pro	oram(s)	Attend	led•					
9. Training Program(s) Attended: Date (from) Date (to) Institute Subject						Subject		
10. Awards/Ho	nours:							

Date:

Signature on behalf of Administrative Head of Department/Head of Department/Head of Office (with seal)

<u>SECTION – II (Self Assessment)</u>

. Brief description of duties:	
Describe your achievements during the period under	r report, giving details of spe
rgets set for you, if any, and targets achieved.	
Targets/Objectives/Goals	Achievements
During the period under report, do you believe tha	t you have made any excepti
ontributions e.g. in successful completion of an extraor	
stematic improvement (resulting in significant benefits	
me and costs)? Be specific, concise and give details in our achievements wherever possible.	a point wise manner, quantin
The second secon	

4. What are the reasons for not achieving spec	cific targets, if any? Give details of factors that
hindered your performance?	
5. Please indicate specific areas in which y	you feel the need to upgrade your skills
through training programs.	
For the current assignment:	
For your future career:	
Tor your ruture career.	
	ections performed by you during the period
under report (applicable only in the case of fie	·
No. and brief description of inspections or	No. and brief description of inspections or
tours expected to be performed during the year.	tours actually performed with reasons
Please indicate if any specific target was fixed.	for shortfall, if any.
7 Date of submission of self aggregament to De	nouting Authority
7. Date of submission of self assessment to Rep	porting Authority:
Place:	Signature of the officer reported upon
- mev!	Esquitate of the officer reported upon

SECTION - III (Assessment by Reporting Authority)

1. Please state whether you agree with the self assessment made by the employee, especially with regard to achievements made during the year.
with regard to demovements made during the year.
2. Please comment on the claim (if made) of exceptional contribution by the employee.
3. Has the employee met with any significant failures in respect of his/her work or
reprimanded for indifferent work or for other causes during the period under report? If yes, please furnish factual details.
reprimanded for indifferent work or for other causes during the period under report? If
reprimanded for indifferent work or for other causes during the period under report? If
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5. \$	State of Health			
(In one do	Integrity general the remarks against the integrity column shall e of the following three options: (a) Beyond doubt. (b ubtful, a secret note is attached. (c) Not watched the m a definite judgement but nothing adverse has been re	o) Since the in employee's v	ntegrity of the	e employee is icient time to
(This	ssessment should rate the employee vis-à-vis lation. The reporting officer will assess the employee 1 , with 1 referring to the lowest grade and 10 to the best	by assigning		_
• •	ssessment of work output:	Γ		
Sl.	Description	Reporting	Reviewing	Initials of
No.		Authority	Authority	Reviewing Authority
1.	Accomplishment of planned work/work allotted as per subjects allotted.			•
2.	Quality of output			
3.	Analytical ability			
4.	Accomplishment of exceptional work/ unforeseen tasks performed			

(b) Assessment of Personal Attributes:

Sl. No.	Description	Reporting Authority	Reviewing Authority	Initials of Reviewing Authority
1.	Attitude to work , sense of responsibility & maintenance of discipline			
2.	Leadership qualities, capacity to work in team spirit and capacity to work in time limit			
3.	Communication skills and Inter-personal relations			
	Total (b)			

Total (a)

No.	ssessment of functional competency: Description	Reporting Authority	Reviewing Authority	Initials of Reviewing Authority
1.	Knowledge of rules/regulations/procedures/IT Skills in the area of function and ability to apply them correctly			Tructionity
2.	Strategic planning ability & decision making ability & Initiative			
3.	Co-ordination ability & ability to motivate and develop subordinates			
	Total (c)			
5.	Overall Grade (on a scale of 1-10)			
5.	Total (a) + Total (b) + Total (c)			
5. (Total (a) + Total (b) + Total (c)	_	f the Reportin	ng Authority
	Total (a) + Total (b) + Total (c)	(with seal)	
	Total (a) + Total (b) + Total (c)	:	with seal)	
Da	Total (a) + Total (b) + Total (c)	: on :	with seal)	

SECTION – IV (Assessment by the Reviewing Authority)

1. Do you agree with the assessment made by the reporting authority with respect to the

work output and the various attribute assessment of the reporting officer significant failures of the employee? (In assessment of attributes please record ye that section and initial):	in respect of case you do	extraordinar not agree wi	ry achievements and /or the any of the numerical
Y	Yes No		
2. In case of difference of opinion, detai	lls and reasons	s for the sam	ne may be given:
3. Please comment on the overall quali and lesser strengths and his/her attite exceeding 100 words):			0
,			
4. Overall grade on a scale of 1 to 10:			
			1
Date:		_	of Reviewing Authority (with seal)
	Name	:	
	Designati		
	(During the	e period of r	eport)
Date of receipt of APAR from the Report	ting Authority		
Date of submission of APAR to the Accep	pting Authority	/	

<u>SECTION – V (Assessment by the Accepting Authority)</u>

1. Do you agree with the remarks of the r	eporting/reviewing a	nuthorities?
Yes	No	
2. In case of difference of opinion, details	and reasons for the	same may be given.
3. Overall grade on a scale of 1 to 10:		
3. Overall grade on a scale of 1 to 10.		
Date:	Signa	ture of Accepting Authority
	Signu	(with seal)
	Name :	
	Designation :	
	(During the period	of report)

Guidelines for filling up of Annual Performance Assessment Report with numerical grading

- 1. Numerical grading are to be awarded by Reporting and Reviewing Authorities for the quality of work output, personal attributes and functional competence of the employee. These should be on a scale of 1- 10, where 1 refers to the lowest grade and 10 to the highest.
- 2. The columns in the APAR should be filled with due care and attention and after devoting adequate time.
- 3. It is expected that any grading of 1 or 2 (against work output or attributes or overall grade) would be adequately justified while commenting on the overall qualities of officer by way of specific failures and similarly, any grade of 9 or 10 would be justified with respect to specific accomplishments. Grades of 1-2 and 9-10 are expected to be rare occurrences and hence the need to justify them. In awarding a numerical grade the reporting and the reviewing authorities should rate the employee against a larger population of his/her peers that may be currently working under them.
- 4. APARs graded between 8 and 10 will be rated as 'Outstanding'.
- 5. APARs graded between 6 and short of 8 will be rated as 'Very Good'.
- 6. APARs graded between 4 and 6 short of 6 will be rated as 'Good'.
- 7. APARs graded below 4 will be rated as 'Fair/Poor'.
- 8. The Columns provided in Section-III for the Reviewing Authority for recording his/her assessment is not mandatory. In case the Reviewing Authority does not agree with any of the numerical assessment of attributes given by the Reporting Authority, only then assessment of the Reviewing Authority may be recorded in the Columns provided in that Section along with initial.
- 9. There should be more openness in the system of assessment. The APAR, including the overall grade and integrity, has to be communicated to the officer reported upon after it has been finalized by the cadre controlling authority/custodian of APARs.

Time schedule for preparation and completion of APAR

Activity	Date by which to be completed
Distribution of blank APAR forms to all concerned (i.e to the employee) by the custodian	1 st April (this may be completed even a week earlier)
Submission of self appraisal to the Reporting Authority by the employee.	30 th April
Submission of appraisal to the Reviewing Authority by the Reporting Authority.	31st May
Submission of appraisal to the Accepting Authority by the Reviewing Authority.	30 th June
Submission of the completed APAR to the Custodian by the Accepting Authority.	31 st July
Disclosure to the employee by the Custodian.	31st August
Receipt of comments/representation of the employee, if any.	30 days from the date of receipt of communication or 30 th September whichever is earlier
Forwarding of representation to the competent authority by the Custodian	15 days from the date of receipt of representation or 15 th October whichever is earlier.
Disposal of representation by the competent authority	Within one month from the date of receipt of representation from the custodian or 15 th November whichever is earlier
Communication of the decision of the competent authority on the representation to the employee by the Custodian.	30 th November
End of the entire APAR process, after which the APAR will be finally taken on record.	15 th December