

## Banda University of Agriculture & Technology, Banda

Annual Confidential Report (ACR) for Subject Matter Specialist & Senior Scientists-cum-Head of BUAT, Banda

# Banda University of Agriculture & Technology, Banda

# Annual Confidential Report (ACR) for Subject Matter Specialist & Senior Scientists-cum-Head

Report for the year/ period ending ........

### PART -I General Particulars (to be filled in by the Employee reported upon):

Office.....

1.	Name of the Employee:	:		
2.	Designation	:		
3.	Father's Name	:		
4.	Date of Birth	:		
5.	Present Address	:		
6.	Mobile No.	:		
7.	Email.	:		
8.	Date of Joining in the University along with post	:		
9.	Date of Joining the present post	:		
10.	Present pay	:		
11.	Educational/Technical Qualifications	:		
12.	Period on leave during the year (except casual	:		
	leave)			
13.	Address for Correspondence (with pin code)	:		
14.	Permanent Address for Correspondence (with pin	:		
	code)			
(Signature of the Employee Member)				
		_	ne in Block Capital letters :	
			gnation:	
Office:  Verified by the Head/ In-chagre/ Director Extension:				
(Signature & Office Seal) Name in Block Capital letters :				
E	Designation:			

## **Part-II: Performance & Achievements**

Report for the year/ period ending ........

(to be filled in by the Employee reported upon)

1.	Publications (Research/review article/ Popular articles in magazine, Proceedings/ Technical bulletin/ Manuals etc.)
2.	Preparation of review reports/proceedings
3.	Medals/Awards/Recognition
4.	Introduction/Commercialization/Popularization of innovative extension methods
5.	Organization of Training/ Kisan Mela/ Exhibition/ Demonstration/OFT/Field Day/Technology Week etc.
6.	Radio Talk / TV talks (Specify Date, topic and place)
7.	Institution and Organization building
8.	Additional duties
9.	Externally funded project
10.	Outstation Exposure Visit
11.	Other Relevant Information, if any:
Date	e:
	(Signature of the Employee Member)
	Name in Block Capital letters:
	Designation:

# Please specify Reasons for shortfall/ constraints with evidence, if any as per particulars mentioned in Part-II.

Office.....

#### Part -III

#### **Assessment by the Reporting Officer**

- 1(a) Please make an objective comment on Part II, as well as on the detailed report made by the Employee reported upon. While commenting, please take due note of the shortfalls/ constraints mentioned by the Employee.
  - (b) Personal (Behaviour, decision making ability, job responsibility and honesty).
  - (c) General Remarks, if any

#### 2. General Assessment

- (i) Please comment on the State of Health
- (ii) Please comment on the Integrity of the employee by circling one of the following options

Beyond doubt

Nothing adverse heard against

Doubtful

(Instructions of Government to be followed in case of adverse remarks)

#### 3. Assessment of Performance & Significant Achievements (Gradation)

S.N.	Grade	Grade Assigned
		(Please Tick)
i.	Outstanding	
ii.	Very Good	
iii.	Good	
iv.	Poor	

P	lace	&	Date	_

	Signature of the Reporting Officer
Name (IN BLOCK LET	TERS)
Desig	rnation

## PART - IV - Remarks of the Reviewing Officer

1-	Length of Service under the Reviewing Officer
2-	Do you agree with the comments made by the Reporting Officer in Part 3(1)? Is there anything you would wish to modify?
3-	Do you agree with the assessment of the Reporting Officer in Part 3(2)? Is there anything you would wish to modify? Please give reasons.
4-	Do you agree with the assessment made by the Reporting Officer in 3(3)- (ii) relating to integrity? Is there anything you would wish to modify? Please give reasons.
5-	Do you agree with the overall grading made by the Reporting Officer? (Please circle).
	No
If NO,	please grade the Officer:
	Outstanding/ Very Good/ Good/ Poor
	Signature of the Reviewing Officer
	NAME :
	DESIGNATION :

## PART - V- Remarks of the Accepting Authority

Do you agree with the overall grading	made by the Reviewin	ng Officer? (Please circle).
	Yes	
	No	
If NO, please grade:		
O	utstanding/ Very Goo	od/ Good/ Poor
		Signature of the Accepting Authorit
		NAME :
		DESIGNATION :

Place & Date