**Annual Performance Assessment Report (APAR)**

 (As Per UGC Regulation 2018)

**Session/Year:**

 **(To be completed and submitted at the end of each assessment year)**

**PART A: GENERAL INFORMATION**

|  |  |
| --- | --- |
| Name |   |
| Father’s Name |  | Gender |  |
| Mother’s Name |  | Contact No. |  |
| Current designation |  | Date of Birth |  |
| Mail ID |  |
| Permanent Address |  |
| Address for Communication |  |
| Date of entry into service |  |
| Date of last promotion if any |  |
| Date of eligibility for promotion |  |
| Date of Retirement |  |

## **PART B: ASSESSMENT CRITERIA**

**Educational Qualifications**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Qualification** | **Name of Degree** | **University/Institute** | **Year** | **Overall****Percentage** |
| Secondary | - |  |  |  |
| Higher Secondary |  |  |  |  |
| UG |  |  |  |  |
| PG |  |  |  |  |
| Other Certificates, if any |  |  |  |  |
| Other Certificates, if any |  |  |  |  |
| Other Certificates, if any |  |  |  |  |
| Other Certificates, if any |  |  |  |  |

**Work Experience (Including Experience in our College)**

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| --- | --- | --- |
| **Duty/Section** | **Institution** | **Duration in Year** |
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**Training Attended:**

**(Example:** SPARK, PFMS, Service Matters, ASAP, PF**)**

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| --- | --- | --- | --- |
| Sl No | Duty/Section | Institution | Duration  |
|  |  |  |  |
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**Leave Details:**

|  |  |  |  |
| --- | --- | --- | --- |
| Sl No | Type of Leave Availed | Maximum Limit/Credit | Leave Availed |
| 1 | Casual Leave |  |  |
| 2 | Half Pay Leave |  |  |
| 3 | Earn Leave |  |  |

**Details of Disciplinary Actions (If Any):**

|  |  |  |  |
| --- | --- | --- | --- |
| Sl No | Type  | Authority | Reason |
|  |  |  |  |
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**PART C: OTHER RELEVANT INFORMATION**

Please give details of any other credentials, significant contributions, awards received, etc. not mentioned earlier.

|  |  |
| --- | --- |
| **Sl. No.** | **Details (Mention Year, Value, etc. where relevant)** |
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**LIST OF ENCLOSURES:** (Please attach copies of Certificates, sanction orders, papers, etc. wherever necessary)

|  |  |
| --- | --- |
| **Sl.No.** | **Details** |
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**Undertaking**

I hereby declare that the information provided above is true to the best of my knowledge and belief. I also understand that discrepancy or misleading information will invite disciplinary action.

Place:

 Signature of the applicant Date:

**Remarks** (Summary of Assessment: Not Satisfactory 🡪 If neither good nor satisfactory in overall assessment)**:**

Manager Principal