



---

# ***PERFORMANCE APPRAISAL FOR FOR FACULTY***

---



**ZENITH SCHOOL OF MANAGEMENT**

**ZENITH GROUP OF INSTITUTIONS**

***Campus: NH-5, Pitapalli, Bhubaneswar, Odisha***

# **PERFORMANCE APPRAISAL FOR FACULTY**

**For the Period from ..... to .....**

## **PART I**

**(To be filled by the Department Office)**

1. Name of the Faculty Member  
(in Capital Letters) :
2. Designation :
3. Whether the officer belongs to Schedule Caste/Schedule Tribe? :
4. Date of Birth :
5. Educational Qualifications  
including professional and  
technical qualifications :
6. Date of continuous appointment  
in the School / University :
7. Date of appointment to the  
present post :
8. Date of confirmation with the  
designation of the Post in which  
confirmed :
9. Period of absence from duty  
(or leave, training etc during  
the year. If he/she has undergone  
training, please specify.) :

**PART II**

**SELF ASSESSMENT REPORT**

**For the Period from .....to .....**

**(To be filled by the Faculty)**

1. Name \_\_\_\_\_ Designation \_\_\_\_\_  
School \_\_\_\_\_
2. Academic Qualifications  
(Mention if any additional qualification has  
been acquired during the year under review)
3. Name of the Courses taught during  
the year
4. Maximum no. of periods per  
course available in the Semester  
as per Time – Table (Lectures and Practical)
5. Teaching load mentioned in  
Time Table (Lectures and Practical)
6. 

No. of the Total Lectures (including Tutorials) delivered	Shortfall (from 4 & 5)	Practical periods taken	Shortfall (from 4 & 5)
---	---------------------------	-------------------------------	---------------------------

7. Reasons for shortfall, if any, in Lectures and practical taken
8. Any specific problem of any student solved, or taken initiative to solve
9. Research Guidance (give brief description of each project and name the student (s) and Co-supervisor, if any. (Attach separates sheets, if needed).
10. Details of any project completed other than students projects
11. Details of any new Experiment added in the Practical course
12. Details of any innovation of any type introduced in the School
13. Papers published (give the title, Co-author, if any, and details of the Journals (Attach separate sheet, if necessary)
14. Any contribution in Laboratory / Course Development, not mentioned above.
15. Contribution to Industrial Development in the form of Consultancy / sponsored R.D.

16. Contribution to Corporate life of the School / University  
(a) Curriculum development (b) Cultural /Extra Curricular activities  
(c) Sports / Community and Extension services,  
(d) Administrative assignments (e) Any other
17. Contribution to Scientific / Technical education through publication of Text-books and Laboratory Manual, Special Lectures and organisation of Seminars, Symposium, etc.
18. Workshop, FDPs, Refresher or Orientation course attended, during the year, give details.
19. Membership or Fellowship of Professional / Academic bodies, societies etc. give details.
20. Additional Contributions which are not covered above and which are relevant for assessment of teacher's activities.
21. Any step taken for Resource generation. Give a brief description. (Attach separate sheet, if needed).

Signature

Name in Block letters

Place

Designation

Date:

Name & Designation  
of the Reporting Officer : .....

### PART III

#### ASSESSMENT OF THE REPORTING OFFICER

Length of service under the reporting officer :

Kindly provide your assessment on the five point scale in respect of the following parameters.

<i><b>Outstanding</b></i>	<i><b>Very Good</b></i>	<i><b>Good</b></i>	<i><b>Satisfactory</b></i>	<i><b>Unsatisfactory</b></i>
<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>

Please indicate your evaluation on each parameter by putting in the appropriate number in the column opposite the parameter.

In case the rating is unsatisfactory, please give reasons there of separately.

#### A. Assessment of Part II filled up by the Faculty Member

Keeping in view the information furnished by the Faculty member, please provide your assessment on the following parameters : (Weightage – 50)

##### Assessment on Five Point Scale

(i)	Teaching load and regularity in taking class	
(ii)	Research guidance to students	
(iii)	Any Projects completed other than the student's projects.	
(iv)	Innovations / experiments introduced in the course	
(v)	Contribution in Curriculum Development	
(vi)	Intellectual capital (Books / Articles/ Patents/ Talks)	
(vii)	Publication in Refreed Journals	
(viii)	Organizing and participation in Seminars/ workshops, special lectures, FDP's, Summer institutes	
(ix)	Contribution to the corporate life of the school / University	
(x)	Membership or Fellowship of Professional / Academic bodies	

**Total (A) :** \_\_\_\_\_

**B. Performance and General Attributes (Weightage – 50)**

**Assessment on Five Point scale**

(i)	Knowledge in the sphere of work	
(ii)	Quality of output	
(iii)	Communication skills (Oral and written)	
(iv)	Initiative and adaptability (resourcefulness in handling normal and unforeseen problems and willingness to take responsibilities in the new area of work)	
(v)	Aptitude to work	
(vi)	Ability to inspire and motivate	
(vii)	Supervisory ability	
(viii)	Interpersonal relations and team work	
(ix)	Integrity and Trustworthiness	
(x)	General conduct	

**Total (B) : \_\_\_\_\_**

**C. General assessment taking all the above parameters**

**Total (A) + (B) : \_\_\_\_\_**

(Outstanding	-	91 to 100
Very Good	-	71 to 90
Good	-	51 to 70
Satisfactory	-	40 to 50
Unsatisfactory	-	upto 40)

Signature of the reporting officer :

Seal :

**Date :**

## **PART –IV**

### **(To be filled in by the Reviewing Officer)**

1. Length of service under the Reviewing officer :
2. Are you satisfied that the Reporting officer has made his / her report with due care and after taking into account all the relevant material :
3. Do you agree with the assessment of the Faculty Member given by the Reporting Officer? :
4. Remarks about any meritorious work or otherwise of the Faculty Member :
5. Remark about grading of the Faculty Members by the Reporting Officer :
6. Has the Faculty Member any special characteristics, and/or any abilities which would justify his/her selection for special assignment. If so, specify :

Signature of the Reviewing Officer

Place:

Name in Block Letters

Date:

Designation  
(During the period of Report)