Annual Performance Assessment Report (APAR)

For

Nagaland Govt. Servants (Group A and Group B Officers)

For the year/period.....

FORMAT OF ANNUAL PERFORMANCE ASSESSMENT REPORT (APAR) FOR GROUP 'A' AND GROUP 'B' OFFICERS

| Annual Performance Assessment Report from | | | to | | | |
|---|---------------------------------|-------------------------------------|----------------|----------|-----------|--|
| SECTION - I | | | | | | |
| | | Basic Info | | | | |
| | | oe filled in by the O | fficer reporte | ed upon) | | |
| 1. Name of the C | Official | | | | | |
| 2. Service/Depar | rtment | | | | | |
| 3. Date of Birth | | | | | | |
| 4. Date of entry | into Governme | ent Service | | | | |
| 5. Grade/Post (D | Ouring the period | od of report) | | | | |
| 6. Date of appoin | ntment to the p | resent post | | | | |
| | | <u> </u> | | | | |
| 7. Reporting, R Authorit | | ccepting Authoriti Name & design | | Donie | od Worked | |
| Authorit | y | Name & design | ation | From | To | |
| Reporting Author | ority | | | 110111 | 10 | |
| Reviewing Auth | ority | | | | | |
| Accepting Author | ority | | | | | |
| | | | | | | |
| 8. Period of Abs | sence: | | | | | |
| | From | То | Т | Type | Remarks | |
| On Leave | | | | | | |
| Others | | | | | | |
| | | | | | | |
| 9. Training Pro | ~ | | | | 7 1 | |
| Date (from) | Date (from) Date (to) Institute | | ute | Subject | | |
| | | | | | | |
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| 10. Awards/Ho | nourc• | | | | | |
| 10. 11 wai us/1101 | iioui și | | | | | |
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| | | | | | | |
| 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 | | |
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| | | der report, giving details of spe |
| | ny, and targets achieved. rgets/Objectives/Goals | Achievements |
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| ontributions e.g. in s stematic improveme | uccessful completion of an extra ent (resulting in significant bene pecific, concise and give details | that you have made any excepting the challenging task or magnitude the public and/or reduction in a point wise manner, quantif |
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| 4. What are the reasons for not achieving speci | ific targets, if any? Give details of factors that |
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| hindered your performance? | |
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| 5. Please indicate specific areas in which ye through training programs. | ou feel the need to upgrade your skills |
| For the current assignment: | |
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| For your future career: | |
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| | |
| 6. Please specify the number of tours/inspec | ctions performed by you during the period |
| under report (applicable only in the case of fiel | _ , , , , , , , , , , , , , , , , , , , |
| 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. |
| Troube martine it may specific images was inten- | 101 511011111111, 11 1111111 |
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| | 1 |
| 7. Have you completed the APARs of all subor | dinate staff for the |
| previous reporting year? | |
| 8. Date of submission of self assessment to Rep | orting Authority |
| o. Date of submission of sen assessment to kep | orting Authority. |
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| | |
| Dlago | Signature of the officer reported una- |
| Place: | Signature of the officer reported upon |

SECTION - III (Assessment by Reporting Authority)

| 1. Please state whether you agree with the self assessment made by the officer reported upon, especially with regard to achievements made during the year. |
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| 2. Please comment on the claim (if made) of exceptional contribution by the officer reported upon. |
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| 3. Has the officer reported upon 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. |
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| 4. Do you agree with the skill up gradation needs as identified by the officer? |
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| 5. State of Health |
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| 6. Integrity |
| (In general the remarks against the integrity column shall be made by the Reporting Authority in |
| one of the following three options: (a) Beyond doubt. (b) Since the integrity of the officer is |
| doubtful, a secret note is attached. (c) Not watched the officer's work for sufficient time to form a definite judgement but nothing adverse has been reported to me about the officer) |
| a definite judgement but nothing adverse has been reported to the about the officer) |
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| 7. Assessment |

(This assessment should rate the officer vis-à-vis his/her peers and not the general population. The reporting officer will assess the officer by assigning grades on a scale of 1 to 10, with 1 referring to the lowest grade and 10 to the best grade)

(a) Assessment of work output:

| Sl. No. | Description | Reporting Authority | Reviewing Authority | Initials of 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 | | | |
| | Total (a) | | | |

(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) | | | |
| | | | | |

| Sl. No. | 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 | | | |
| 2. | Strategic planning ability & decision making ability & Initiative | | | |
| 3. | Co-ordination ability & ability to motivate and develop subordinates | | | |
| | Total (c) | | | |
| | Pen picture of the officer reported upon. Please con mpetence of the officer reported upon. | nment on the | overall qual | ties and |

| 9. Overall Grade | (on a scale of 1-10) | | | |
|----------------------|-----------------------------------|------|-------------------------|------------------------------------|
| | Total (a) + Total (b) + Total (c) | | | |
| | 10 | | | |
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| Date: | | | | the Reporting Authority with seal) |
| | Nan | ne | : | |
| | | _ | on : ne period of re | |
| Data of manint of A | DAD from the off comment of 1 | | | |
| Date of receipt of A | PAR from the officer reported u | ıpon | | |

Date of submission of APAR to the Reviewing Authority

SECTION – IV (Assessment by the Deputy Commissioner of the District)

(This assessment should rate the officer vis-à-vis his/her peers with regard to his/her contribution to the regulatory and/or developmental activities of the officer in the district, and is applicable only for district officials)

| - | | . Contributions towards be specifically mentioned | 0 |
|-----------------------------|----------------------|---|---------------------|
| denderations/performand | e of the DFDB may | be specifically mentioned | u: |
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| | | | |
| 2. Physical availability in | Station during the | reporting period (in perc | entage): |
| | 100 90 80 7 | 70 60 50 40 | |
| 3. Performance of the off | icer in executing de | partment's activities and | schemes: |
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| 4 Proactive action tak | en by the officer | and his/her contribut | ions towards overal |
| development of the Distri | _ | | |
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| | | Please comment on the over | erall qualities and |
| competence of the officer | • | | |
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Date:

Signature of Deputy Commissioner (with seal)

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

1. Do you agree with the assessment made by the reporting authority with respect to the work output and the various attributes in Section III & IV? Do you agree with the

| assessment of the reporting officer significant failures of the Officer reporte numerical assessment of attributes pleafor you in that section and initial): | ed upon? (In c | case you do no | ot agree with any of the |
|--|-----------------|----------------|---------------------------------------|
| | Yes No | | |
| | | | |
| 2. In case of difference of opinion, deta | ails and reason | s for the sam | e may be given: |
| | | | |
| | | | |
| | | | |
| | | | |
| 3. Please comment on the overall qual- lesser strengths and his/her attitude exceeding 100 words): | | _ | _ |
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| 4. Overall grade on a scale of 1 to 10: | | | |
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| | | | |
| Date: | | _ | of Reviewing Authority (with seal) |
| | Name | : | |
| | Designat | ion : | |
| | _ | e period of re | |
| | | | |
| Date of receipt of APAR from the Repo | rting Authority | | |
| Date of submission of APAR to the Acce | epting Authorit | у | |

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

| 1. Do you agree with the remarks of the r | reporting/reviewing authorities? |
|--|--|
| Yes | s No |
| 2. In case of difference of opinion, details | and reasons for the same may be given. |
| | |
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| | |
| 3. Overall grade on a scale of 1 to 10: | |
| | |
| | |
| Date: | Signature of Accepting Authority (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 officer reported upon. 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 officer 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 officer to be reported upon) by the custodian | 1 st April (this may be completed even a week earlier) |
| Submission of self appraisal to the Reporting Authority by the Officer reported upon. | 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. | 31st July |
| Disclosure to the Officer reported upon by the Custodian. | 31st August |
| Receipt of comments/representation of the officer reported upon, 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 officer reported upon 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 |