

ANNUAL
PERFORMANCE ASSESSMENT REPORT
(APAR)
FOR

ALL NAGALAND GOVT.SERVANTS
(Both Gazetted & Non-Gazetted)

For the year/period _____

Annual Performance Assessment Report for the period from _____**Section I - Basic Information****(To be filled in by the Administration Department/HoD/Head of Office)**

1. Name of the officer reported upon :
2. Name of the Department & Branch :
3. Service :
4. Date of Birth :
5. Date of entry into Government Service :
6. Present post :
7. Date of appointment to the present post :

8. Reporting, Reviewing & Accepting Authorities:

	Name & Designation	Period worked
Reporting Authority		
Reviewing Authority		
Accepting Authority		

8. Period of Absence:

	Period	Type	Remarks
On leave	Nil		
Others	Nil		

9. Training Programme (s) Attended:

Date (from)	Date (to)	Institute	Subject

10. Awards/Honours : **Nil**

Date : _____

**Signature on behalf of
Administrative Department/HoD/Head of Office**

Section II – Self Assessment

1. Brief description of duties.

2. Describe your achievements during the period under report, giving details of specific targets set by reporting/reviewing/accepting officer, if any, and targets achieved. Exceptional contributions made e.g. in successful completion of an extraordinarily challenging task or major systematic improvement (resulting in significant benefits to the public and/or reduction in time and costs) may be separately indicated. Be specific, concise and give details in a point wise manner, quantifying your achievements wherever possible.

3. What are the reasons for not achieving specific targets, if any? Give details of factors that hindered your performance?

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4. Please indicate specific areas in which you feel the need to upgrade your skills through training program (s).

<p>(i) For the current assignment:</p> <p>(ii) For your future career:</p>
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5. Please specify the number of tours/inspections performed by you during the period under report ***(Applicable only in the case of field officers)***

<i>No. and brief description of inspection/tours expected to be performed during the year. Please indicate if any specific target was fixed.</i>	<i>No. and brief description of inspections/tours actually performed with reasons for shortfall, if any</i>

Date:

Signature of the officer reported upon

Section III - Assessment

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.

2. Please comment on the claim (if made) of exceptional contribution by the officer reported upon.

3. Has the officer reported upon met with any significant failures in respect of his work? If yes, please furnish factual details.

4. Do you agree with the skill up gradation needs as identified by the officer?

5. Integrity.

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6. State of Health

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Section – IV – Assessment

(This assessment should rate the officer vis-à-vis his 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)

1. Assessment of work output

S. No.	Assessment	Reporting Authority	Reviewing Authority	Initial 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 (1)			

2. Assessment of personal attributes

S. No.	Assessment	Reporting Authority	Reviewing Authority	Initial 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 (2)			

3. Assessment of functional competency

S. No.	Assessment	Reporting Authority	Reviewing Authority	Initial of Reviewing Authority
1	Knowledge of rules/regulations/procedures in the area of function and ability to apply them correctly			
2	Strategic planning ability & decision making ability			
3	Co-ordination ability & ability to motivate and develop subordinates			
	Total (3)			

4. Pen picture by Reporting Officer. Please comment on the overall qualities and competence of the officer reported upon.

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Overall Grade on a scale of 1 to 10 ((Total (1) + Total (2) + Total (3))/10)			
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Date :

Signature of Reporting Authority

Assessment by the Deputy Commissioner of the District

(This assessment should rate the officer vis-à-vis his 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**)

- 1. Participation and attendance in DPDB. Contributions towards adding value to the deliberations/performance of the DPDB may be specifically mentioned.**

- 2. Physical availability in Station during the reporting period (in percentage) :**

100	90	80	70	60	50	40
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- 3. Performance of the officer towards regulatory and/or developmental activities and his contribution towards the overall development of the district.**

- 4. Brief comments on the public perception of the officer, bringing out specific appreciation/complaints by public.**

Date:

Signature of Deputy Commissioner

Section V – Review

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 in respect of extraordinary achievements and /or significant failures of the Officer reported upon ? ***(In case you do not agree with any of the numerical assessment of attributes please record your assessment in the column provided for you in that section and initial)***

Yes	No
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2. In case of difference of opinion, details and reasons for the same may be given.

4. Please comment on the overall qualities of the officer including areas of strengths and lesser strengths and his attitude towards working the weaker sections (Not exceeding 100 words)

4. Overall grade on a scale of 1 to 10:

Date :

Signature of Reviewing Authority

SECTION VI – ACCEPTANCE

1. Do you agree with the remarks of the reporting/reviewing authorities?

Yes	No
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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:

Date :

Signature of Accepting Authority

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-IV 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 preparing/completing of APAR
(Reporting year-Financial year)***

S.No.	Activity	Date by which to be completed
1.	Distribution of blank APAR forms to all concerned(i.e. to the officer to be reported upon where self-appraisal has to be given and to reporting officers where self-appraisal is not to be given)	31 st March. (This may be completed even a week earlier.)
2.	Submission of self-appraisal to Reporting Officer by officer to be reported upon (where applicable).	15 th April.
3.	Submission of report by reporting Officer to reviewing Officer	30 th June
4.	Report to be completed by Reviewing Officer and to be sent to Administration or CR Section/Cell or accepting authority, wherever provided.	31 st July
5.	Appraisal by accepting authority, wherever provided	31 st August
6.	(a) Disclosure to the Officer reported upon where there is no accepting authority. (b) Disclosure to the Officer reported upon where there is accepting authority	01 st September 15 th September
7.	Receipt of representation, if any, on APAR	15 days from the date of receipt of communication
8.	Forwarding of representations to the competent authority (a) where there is no accepting authority for APAR (b) where there is accepting authority for APAR	21 st September 06 th October
9.	Disposal of representation by the competent authority	Within one month from the date of receipt of representation.
10.	Communication of the decision of the competent authority on the representation by the APAR Cell	15 th November
11.	End of the entire APAR process, after which the APAR will be finally taken on record.	30 th November