

**Annual Self-Assessment for the Performance
Based Appraisal
(Teaching)**




(Dr. R. O. Ganjiwale)
Principal
PRINCIPAL
Institute of Pharmaceutical Education & Research
Borgaon (Meghe), Wardha

**Annual Self-Assessment for the Performance Based Appraisal
System (PBAS)
Academic Session**

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


PART A : GENERAL INFORMATION

1.	Name (in Block Letters) :	:	
2.	Father's Name / Mother's Name/ Husband's Name	:	
3.	Department	:	
4.	Current Designation & Pay Scale	:	
5.	Date of Joining	:	
6.	Address for correspondence (with Pincode)	:	
7.	Permanent Address (with Pincode) Telephone No. Email	: : :	
8.	Whether acquired any degrees or fresh academic qualifications during the year	:	

9. Academic Staff College Orientation / Refresher Course attended during the year :
NA

Name of the Course / Summer School	Place	Duration	Sponsoring Agency




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PART B : ACADEMIC PERFORMANCE INDICATORS

(Please see detailed instructions of this PBAS proforma before filling out this section)

CATEGORY : I. TEACHING, LEARNING AND EVALUATION RELATED ACTIVITIES

- i) Lecturers, Seminars, Tutorials, Practicals, Contact Hours (give semester-wise details, where necessary)

S. No.	Subject	Year	Mode of teaching*	No. of classes allotted	No. of Classes conducted	% of Classes / Practicals taken per documented record
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

*Lecture(L), Seminar (S), Tutorial (T), Practical (P), Contact Hours (C)

		API Score
(a)	Classes Taken (max 50 for 100% performance & proportionate score up to 80% performance, below which no score may be given)	50
(b)	Teaching load in excess of UGC norm (max score : 10)	10

- ii) Reading / Instructional material consulted and additional knowledge resources provided to students

S. No.	Subject	Consulted	Prescribed	Additional Resource provided
1.				
2.				
API score based on preparation and imparting of knowledge / instruction as per curriculum & syllabus enrichment by providing additional resources to Students (max. score : 20)				API Score
				20

- iii) Use of participatory and innovative Teaching-Learning Methodologies, Updating of Subject Content, Course Improvement etc.

S. No.	Short Description	API Score
1.	Use of animated presentation for effective learning	
2.	PPT Presentation	
	Total Score (Max Score : 20)	20



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Borgaon (Meghe), Wardha 442001 (M. S.)

iv) Examination Duties Assigned and Performed


S. No.	Type of Examination Duties	Duties Assigned	Extent to which carried out (%)	API Score
1.	University Examination	External and Internal Examiner Valuation/moderation Paper setter Member, Subject to Exam Committee	100	
2.	College Examination	Invigilation Valuation Verification	100	
	Total Score (Max Score : 25)			25

**CATEGORY : II. CO-CURRICULAR, EXTENSION, PROFESSIONAL DEVELOPMENT
RELATED ACTIVITIES**

Please mention your contribution to any of the following :

S.No.	Type of Activity	Average Hrs / week	API Score
	Extension, Co-curricular & field based Activities		
1.	IQAC Member		
2.	Education Tour Incharge		
3.	Editor Marathi section, 'Spectrum'		
4.	Students Welfare officer		
5.	GFC Incharge		
	Total (Max:20)		20
	(ii) Contribution to Corporate Life and Management of the Institution	Yearly / Semester wise responsibilities	API Score
1.	ARC officer incharge(B. Pharm-I)		
2.	Enrollment online work		
3.	Online Exam form Submission		
	Total (Max:15)		
	(iii) Professional Development Activities		
	Membership: APTI MSPC		
	Total (Max:15)		
	Total Score (i+ ii + iii) (Max : 25)		25




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CATEGORY : III. RESERCH, PUBLICATIONS AND ACADEMIC CONTRIBUTIONS

A) Published Papers in journals: **NIL**

S. No.	Title with page nos.	Journal	ISSN/ISBN No	Whether peer reviewed. Impact Factor, if any	No. of co-authors	Whether you are the main author	API Score

B) (i) Articles / Chapters published in Books: **NIL**

S. No.	Title with page nos.	Book Title, editor & Publisher	ISSN/ ISBN No	Whether peer reviewed.	No. of co-authors	Whether you are the main author	API Score

C) (ii) Full Papers in conference Proceedings: **NIL**

S. No.	Title with page nos.	Details of Conference Publication	ISSN/ISBN No	No. of co-authors	Whether you are the main author	API Score

D) (iii) Books Published as single author or as editor: **NIL**

S. No.	Title with page nos.	Type of Book & Authorship	Publisher & ISSN/ ISBN No	Whether peer reviewed. Impact Factor, if any	No. of co-authors	Whether you are the main author	API Score

E) III C). Ongoing and Completed Research Projects and Consultancies: **Minor Research Project**

(C) (i & ii) Ongoing Projects / Consultancies

S. No.	Title	Agency	Period	Grant / Amount Mobilized (Rs. lakh)	API Score
1.					




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F) (C) (iii & iv) Completed Projects / Consultancies: **NIL**

S. No.	Title	Agency	Period	Grant / Amount Mobilized (Rs. lakh)	Whether policy document / patent as outcome	API Score

G) (D) Research Guidance:

S. No.	Number Enrolled	Thesis Submitted	Degree awarded	API Score
M. Pharm.		-	-	
Ph. D.				

(E) (i) Training Courses, Teaching-Learning-Evaluation Technology Programmes, Faculty Development Programmes (Not less than one week duration)

S.No.	Programme	Duration	Organised by	API Score

(E) (ii) Papers presented in Conferences, Seminars, Workshops, Symposia: **NIL**

S. No.	Title of Paper presented	Title of Conference / Seminar	Organised by	Whether international / national / state / regional / college or University level	API Score

(E) (iii) Invited Lectures and Chairmanships at national or international conference / seminar etc

S. No.	Title of Paper presented	Title of Conference / Seminar	Organised by	Whether international / national	API Score




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IV SUMMARY OF API SCORES

	Criteria	Last Academic Year	Total – API Score for Assessment Period	Annual Av. API Score for Assessment Period
I	Teaching, Learning and Evaluation related activities			
II	Co-curricular, extension, Professional development etc			
	Total I + II			
III	Research and Academic Contribution			

CATEGORY: IV. LEAVE RECORD

Total number of leave enjoyed during year 2015-16.

1.	Casual Leave	:	
2.	Medical Leave	:	
3.	Earned Leave	:	
4.	Duty Leave	:	
5.	Extra Ordinary Leave	:	
6.	Absent	:	

PART C : OTHER RELEVANT INFORMATION

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

S. No.	Details (Mention Year, value etc. where relevant)

LIST OF ENCLOSURES : *(Please attach, copies of certificates, sanction, orders, papers etc. wherever necessary)*

1	6
2	7
3	8
4	9
5	10

I certify that the information provided is correct as per records available with the university and / or documents enclosed along with the duly filled PBAS proforma.




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Signature of the faculty with
Designation, Place & Date

Signature of HOD

N.B : The Annual Self-Assessment proforma duly filled along with all enclosures, submitted for CAS promotions will be verified by the university / college and information filled with the IQAC

Total API Score for : *
Assessment period

Date : _____

Signature of Principal

* To be filled by the Principal




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**Annual Self-Assessment for the Performance
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फार्म नं. ४६४/२

इन्स्टिट्यूट ऑफ फार्मास्युटीकल एज्युकेशन अँड रिसर्च

बोर्गांव (मेघे), वर्धा

परिशिष्ट - ब (भाग - ३)

(स्वयंमूल्यनिर्धारण अहवाल)

वैशिष्ट्यपूर्ण कामे

कालावधी

१. शासकीय अधिकार्याचे / कर्मचार्याचे नांव : _____
२. पद : _____
३. या वर्षी / कालावधीत नेमून दिलेल्या कामाची उद्दिष्टे (असल्यास) : _____
४. वर्षभरात केलेली उल्लेखनीय अशी महत्वाची व वैशिष्ट्यपूर्ण कामे (उद्दिष्टांच्या संदर्भासहीत) : _____

अधिकार्याची / कर्मचार्याची सही, नांव व पद

.....

१. शासकीय अधिकारी / कर्मचारी यांच्यावरील :
मताशी सहमत आहात का ?
२. नसल्यास त्याची कारणे

प्रतिवेदन अधिकार्यांची सही, नांव व पदनाम




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परिशिष्ट - ब (भाग - २)

गट क्र. "अ" गट क्र. "क" शासकीय अधिकारी / कर्मचारी यांच्यासाठी गोपनीय
अहवालाचे स्वयंमूल्यनिर्धारण अहवाल प्रपत्र

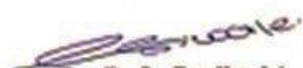
स्वयंमूल्यनिर्धारण अहवाल लिहिणाऱ्या अधिकाऱ्यांना / कर्मचाऱ्यांना सूचना

१. वर उद्दिष्टे ठरवून देण्यात आली असतील तर ती उद्दिष्टे सर्वसाधारण सूचनांनुसार अथवा विशेष सूचनानुसार ठरवून देण्यात आली होती की आपापसातील चर्चेनुसार ठरविण्यात आली होती.
२. सर्व दैनंदिन कामांची यादी येथे देऊ नये. फक्त ठळक वैशिष्ट्यपूर्ण व उल्लेखनीय कामगिरीचा उल्लेख करावा. (उद्दिष्टे ठरवून देण्यात आली असल्यास उद्दिष्टांचा संदर्भ देऊन) संदिग्ध विधाने टाळावीत व नेमके विधान करावी.
३. तुमच्या कामगिरीबाबतचे तुमचे अभिप्राय, दिलेल्या जागेवर देऊन मर्यादित ठेवावेत. काहीही सहपत्रे त्यास जोडू नयेत ती गोपनीय अहवालाच्या बस्तीत ठेवली जाणार नाहीत व कर्मचाऱ्यास परत करण्यात येतील.
४. "मी" माझ्या बरिष्ठाचे समाधान / पूर्ण समाधान होईपर्यंत काम केले "किंवा" बरिष्ठांनी माझे काम वाखावले अशी किंवा अशासारखी विधाने करू नयेत, अशी विधाने केल्यास ती दुर्लक्षित करण्यात येतील.
५. स्वयंमूल्य निर्धारण अहवाल अर्ध्या पानातच लिहावा.
६. स्वयंमूल्य निर्धारण अहवाल अधिकारी / कर्मचारी यांनी त्यांना प्राप्त झाल्यापासून १५ दिवसांच्या आत प्रतिवेदन अधिकाऱ्याकडे द्यावा.

प्रतिवेदन अधिकाऱ्यांना सूचना

१. गोपनीय अहवाल लिहितांना कर्मचाऱ्यांचा भाग - ३ मध्ये लिहिलेल्या स्वयंमूल्यनिर्धारण अहवाल विचारात घ्यावा व तो घेतला गेला असल्याचा विशिष्ट उल्लेख गोपनीय अहवालास करण्यात यावा.
२. वरील सूचना क्रमांक ६ अनुसार स्वयंमूल्यनिर्धारण अहवाल प्राप्त न झाल्यास प्रतिवेदन अधिकारी स्वतः गोपनीय अहवाल लिहू शकेल.




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फार्म नं. ४६४/३

इन्स्टिट्यूट ऑफ फार्मास्युटीकल एज्युकेशन अँड रिसर्च

बोरगांव (मेघे), वर्धा

परिशिष्ट - ब (भाग - ४)

गट क्र. "अ" ते गट क्र. "क" च्या अधिकाऱ्यांची / कर्मचाऱ्यांची सर्वसाधारण योग्यता व चरित्र यासंबंधी अभिप्राय
(Estimate of General Ability and Character of Grade 'A' to Grade 'C' Officers / Employees)

०१ नांव	: श्री/श्रीमती/कुमारी _____				
Name	Shri/Smt./Kum. _____				
०२ प्रतिवेदनाचा कालावधी	: पासून	दिवस :	महिना :	वर्ष :	पर्यंत
Period of Report	from :	Date :	Month :	Year	To Date : Month : Year
०३ धारण केलेले पद/पदे	: _____				
Post / Posts held	_____				
०४ उद्योगप्रियता व कार्यक्षमता	: अत्युत्कृष्ट	उत्कृष्ट	चांगले	साधारण	साधारणपेक्षा कमी
Industry & Application	Outstanding	Very good	Good	Average	Below Average
०५ हाताखालील कर्मचाऱ्यांकडून काम करून घेण्याची क्षमता	: अत्युत्कृष्ट	उत्कृष्ट	चांगले	साधारण	साधारणपेक्षा कमी
Capacity to get work done by Subordinate	Outstanding	Very good	Good	Average	Below Average
०६ सहकारी व जनता यांच्याशी असलेले संबंध	: सकार्याचे	सौजन्याचे	मदतीचे	उदासीन	अमैत्रीपूर्ण
Relation with colleagues & the public	Cooperative	Courteous	Helpful	Indifferent	Unfriendly
०७ सर्वसाधारण बुद्धीमत्ता	: अतिशय बुद्धीमान	बुद्धीमान	निश्चित चांगली	चांगली	साधारण
General Intelligence	Very Brilliant	Brilliant	Intelligent	Average	Dull.
०८ निर्णयशक्ती उपक्रमशीलता व धडाडीयासह कार्यक्षमता	: अत्युत्कृष्ट	उत्कृष्ट	निश्चित चांगली	चांगली	साधारण प्रशासनीक कार्यक्षमता कमी
Administrative ability including judgement/ initiative / drive	Outstanding	Very good	Positively good	Good	Average Below Average
०९ तांत्रिक कार्यक्षमता (संबंधित असेल तेथे)	: _____				
Technical professional ability (where relevant)	_____				
१० विशेष कल	: _____				
Special attitude	_____				
११ सचोटी व चरित्र	: _____				
Integrity Character	_____				
१२ प्रदान करण्यात आलेल्या शक्तीचा वापर करतात काय?	होय	अंशतः	नाही		
whether power delegated are fully utilised	Yes	Partly	No		
१३ पदोन्नतीसाठी पात्रता	: अयोग्य	ज्येष्ठतेनुसार योग्य	त्वरीत बढतीसाठी योग्य		
Fitness for Promotion	Unfit	Fit in normal course	Fit for accelerated Promotion.	(According to seniority)	
१४ प्रशिक्षणासाठी आवश्यक क्षेत्र :	येथे आवश्यक त्या क्षेत्राचा उल्लेख करावा. _____				



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१५ प्रकृतीमान	:	चांगले नाही	चांगले	उत्कृष्ट
Status of Health	:	Not Good	Good	Very Good.
१६ क्षेत्रीय स्तरावर काम करण्याची योग्यता	:	आहे	नाही	संबंधित नाही
Fitness for field work	:	Yes	No	Not Relevant
१७ संगणकावर काम करण्याची आवड	:	आहे	नाही	दिसून आली नाही
Willingness to work on Computer	:	Yes	No	Not seen
१८ सर्वसाधारण मूल्यमापन	:			
General Assessment	:			
१९ प्रतवारी (हाताने लिहावी)	:	अ ⁺ अत्युत्कृष्ट, अ उत्कृष्ट, ब ⁺ निश्चित चांगली, ब चांगली ब ⁻ साधारण, क साधारणपेक्षा कमी		
Grading (Write in Handwriting)	:	A ⁺ Outstanding, A very Good, B ⁺ Positively Good, B Good B ⁻ Average, C Below average.		

ठिकाण :

Place :

दिनांक :

Date :

प्रतिवेदन अधिकाऱ्याची सही, नाव व पदनाम

Signature, Name & Designation of the Reporting Officer

परिशिष्ट - ब (भाग - ५)

पुनर्विलोकन अधिकाऱ्याचे अभिप्राय

Remarks of the Reviewing Officer

- ०१ पुनर्विलोकन अधिकाऱ्याच्या : _____
हाताखालील सेवावधी
Length of service Under Reviewing Officer
- ०२ आपण प्रतिवेदन अधिकाऱ्याशी सहमत आहात : _____
(सहमत नसल्यास कुठल्या अभिप्रायाशी सहमत
नाही हे विनिर्दिष्टपणे नमूद करावे) की त्यांच्या
मुल्यमापनामध्ये काही फेरफार करण्याची किंवा
भर घालण्याची आपली इच्छा आहे?
Do you agree with the Reporting Officer
(if not state specifically the remarks with
which you do not agree) or do you wish
to Modify or add to his assessment?
- ०३ प्रतवारी (हाताने लिहावी) : अ⁺ अत्युत्कृष्ट, अ उत्कृष्ट, ब⁺ निश्चित चांगली, ब चांगली
ब⁻ साधारण, क साधारणपेक्षा कमी
Grading (Write in Handwriting) : A⁺ Outstanding, A very Good, B⁺ Positively Good,
B Good, B⁻ Average, C Below average.

ठिकाण :

Place :

दिनांक :

Date :

प्रतिवेदन अधिकाऱ्याची सही, नाव व पदनाम

Signature, Name & Designation of the Reviewing Officer




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