

# PERFORMANCE APPRAISAL SYSTEM

G. M. MOMIN WOMEN'S COLLEGE,  
BHIWANDI

# PBAS PROFORMA

## University of Mumbai

Name & Address of the University Department/College:  
K. M. E Society's G. M. Momin Women's College

### REVISED PBAS PROFORMA FOR SELF ASSESSMENT / DIRECT RECRUITMENT / PROMOTION UNDER UGC CAREER ADVANCEMENT SCHEME FOR TEACHERS / EQUIVALENT POSTS

Application for promotion from:

Self Assessment \_\_\_\_\_ For the year

Total API score calculated as per Appendix 3:

#### **PART A : GENERAL INFORMATION AND ACADEMIC BACKGROUND**

Sr. No.	Particulars	
1.	Name (in Block Letters) :	
2.	Father's Name / Mother's Name:	
3.	Department/Subject applied for:	
4.	Current Designation Pay Band & Grade Pay:	
5.	Date of last Promotion:	
6.	Which position and grade pay are you an applicant under CAS?	
7.	Date of eligibility for promotion:	
8.	Date and Place of Birth:	
9.	Sex:	
10.	Marital status:	
11.	Nationality:	
12.	Indicate whether belongs in SC/ST/OBC category:	
13.	Address for correspondence (with Pincode):	
14.	Permanent Address (with Pincode):	
15.	Telephone No.:	
16.	Email:	

**17. Academic Qualifications (Matric till post graduation) :-**

Examinations	Name of the Board/ University	Year of Passing	Percentage of marks obtained	Division/ Class/ Grade	Subject

**18. Research Degree(s)**

Degrees	Title	Date of award	University

**19. Appointments held prior to joining this institution**

Designation	Name of Employer	Date of Joining		Salary with Grade	Reason of leaving
		Joining	leaving		

**20. Record of academic service in this institution:-**

Designation	Nature of Appointment (Regular/ Temporary/ Ad-hoc/Fixed Tenure )	Name of the Employer	Date of Joining		Salary with Grade Pay	Reason of leaving
			Joining	Leaving		

21. Period of teaching experience : P.G. Classes (in years) : U.G. Classes (in years )

22. Research Experience excluding years spent in M. Phil / Ph. D (in years) :

23. Fields of Specialization under the Subject / Discipline

24. Academic Staff College Orientation / Refresher Course attended :

Name of the Course/ Summer Course	Place	Duration	Sponsoring Agency

( Attach certified true copy of the certificates )

**25. Detail of publications attached to the PBAS format ( for evaluation )**

Sr. No.	Nature of Publication ( Book Review/ Research Paper etc.)	List of author/s as it appear in the publication	Name of the Book & the publishers/Journal, Issue no. and year of publication, page nos.	ISSN/ISBN number	Impact factor ( In case of journal )

**26. Any Other relevant information: ( please attach an additional sheet/paper if required )**  
*Annexure (Attested Photo Copies of the Certificates- )*

**27. Please describe in brief about your future plans in relation to the following:**

<b>I</b>	<b>Teaching</b>	
<b>II</b>	<b>Research</b>	
<b>III</b>	<b>Mentoring of students</b>	
<b>IV</b>	<b>Social Responsibility</b>	

**Date:**

**Signature of the staff**

**Remarks/Observations/Comments by the Head or Senior most teacher of the Department**

**Date:**

**Signature of the Head or  
Senior most teacher of the Department**

**Place: Mumbai**

**Date:**

**Name & Signature of the applicant**

**PART B : ACADEMIC PERFORMANCE INDICATORS**

**CATEGORY: I. TEACHING, LEARNING AND EVALUATION RELATED ACTIVITIES**

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

Sr. No.	Course / Paper	Level	Mode of Teaching*	Hours per week allotted	% of classes taken as per documented record

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

- *Annexure 4 (Time Table )*

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

**(ii) Reading / Instructional material consulted and additional knowledge resources provided to students.**

Sr. No.	Course / Paper	Consulted	Prescribed	Additional Resource provided	Self API Score	Verified API Score
API score based on Preparation and imparting of knowledge / instruction as per curriculum & syllabus enrichment by providing additional resources to Students (max. score :20)						

**(iii) Use of Participatory and Innovative Teaching-Learning Methodologies, Updating of Subject Content, Course Improvement etc.**

S. No.	Short Description	Self: API Score	Verified API Score
	Total Score ( <i>Max. Score :20</i> )		

**(iv) Examination Duties Assigned and Performed**

Sr. No.	Type of Examination Duties	Duties Assigned	Extent to which carried out (%)	Self: API Score	Verified AP Score
01					
	Total Score ( <i>Max. Score 25</i> )				

- *Annexure- (Attested Photo Copies of Letter from Exam Controller, University of Mumbai and CAP attendance Certificates)*



**iii) Books Published as single author or as editor**

Sr. No.	Title with page nos.	Type of Book & Authorship	Publisher & ISSN/ ISBN No.	Whether peer reviewed	No. of co-authors	Whether you are the main author	Self: API Score	Verified API Score

**C) Ongoing and Completed Research Projects and Consultancies**

**(i) Ongoing Projects**

Sr. No.	Title	Agency	Period	Grant /Amount Mobilized (Rs. Lakh)	Self: API Score	Verified API Score

**(ii) Ongoing Consultancies**

Sr. No.	Title	Agency	Period	Grant /Amount Mobilized (Rs. Lakh)	Self: API Score	Verified API Score

**(iii) Completed Projects**

Sr. No.	Title	Agency	Period	Grant /Amount Mobilized (Rs. Lakh)	Self: API Score	Verified API Score

**(iv) Completed Consultancies**

Sr. No.	Title	Agency	Period	Grant /Amount Mobilized (Rs. Lakh)	Self: API Score	Verified API Score

**D) Research Guidance**

Sr. No.	Number Enrolled	Thesis Submitted	Degree awarded	Self: API Score	Verified API Score
M. Phil or equivalent					
Ph. D. or equivalent					

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

Sr. No.	Programme	Duration	Organized by	Self: API Score	Verified API Score

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

Sr. No.	Title of the paper presented	Title of Conference / Seminar	Organized by	Whether international /National/State /Regional/College or University level	Self: API Score	Verified API Score

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

Sr. No.	Title of Lecture / Academic Session	Title of Conference / Seminar etc	Date of Event	Organized by	Whether international / National/ State	Self: API Score	Verified API Score

**Please submit the Xerox copies of published papers and presentations**

**IV. SUMMARY OF API SCORES**

	Criteria	Last Academic Year	Total-API Score for Assessment Period	Annual Av. API Score for Assessment Period : Self	Verified API Score
I	Teaching, Learning and Evaluation related activities				
II	Co-curricular, Extension, Professional development etc.				
	<b>Total I + II</b>				
III	Research and Academic Contribution				



**PART C : OTHER RELEVANT INFORMATION**

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

<b>Sr. No.</b>	<b>Details (Mention Year, value etc. where relevant)</b>
01	

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

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

Signature of the faculty with  
Designation, Place & Date

Signature of HOD / Principal

# D2 FORM

**APPENDIX 'D-2'**  
( See Statute 422 )  
**FORM FOR ASSESSMENT OF WORK OF COLLEGE LECTURERS**

Year of Assessment \_\_\_\_\_

**I. Basic Information :-**

i) Name of the college in full \_\_\_\_\_

ii) Region in which situated ( Urban / Rural ) \_\_\_\_\_

iii) Name of the Lecturer ( in full ) Shri/Smt./Kumari \_\_\_\_\_  
( Beginning with surname )

iv) Date of Birth \_\_\_\_\_

v) Qualifications of the Lecturer :-

Degree and post-graduate degree examination	Special / Principal subject offered	Allied Additional/Subordinate subjects offered	Class obtained	Year of Passing	University

vi) Subjects taught and faculty \_\_\_\_\_

vii) Designation \_\_\_\_\_

viii) a) Date of joining the present college \_\_\_\_\_

b) Date of approval of appointment by the University \_\_\_\_\_

ix) Teaching experience at the college level \_\_\_\_\_ years \_\_\_\_\_ months

Names of the Institutions where employed previously	Period of service from to	Designation	Classes taught	Subjects taught	Scale of pay

II. Courses taught and work-load	Number of periods per week			
	Lectures	Tutorials	Practicals	Subjects and papers taught
i) Under graduate				

..2...

III. Teaching Methods Applied :-

Name and describe new teaching methods used, if any, besides lecture method i.e

- i) Distributing lecture synopsis and bibliography \_\_\_\_\_
- ii) Encouraging questions in class \_\_\_\_\_
- iii) Announcing topics for discussion in advance \_\_\_\_\_
- iv) Holding Seminars \_\_\_\_\_
- v) Use of audio-visual aids \_\_\_\_\_  
( wherever facilities exist )
- vi) Holding of moot courts, arranging for court visits etc. in case of the law students  
\_\_\_\_\_

IV. Contribution to COSIP & COHSSIP Schemes in the college or through ULP ( wherever such scheme exists )

\_\_\_\_\_  
\_\_\_\_\_

V. Any other contribution in :-

- i) Teaching Methods \_\_\_\_\_
- ii) Evaluation Techniques \_\_\_\_\_
- iii) Course Development etc. \_\_\_\_\_

VI. Academic and Professional Growth ( During the preceding three years ) :-

- I) Research qualifications acquired \_\_\_\_\_
- ii) Research projects undertaken \_\_\_\_\_
- iii) Research papers published indicating titles and names of journals in which published  
\_\_\_\_\_
- iv) Guidance rendered to Research Scholars \_\_\_\_\_
- \*v) Participation in Seminars,  
Workshops and Conferences \_\_\_\_\_
- \*vi) Participation in orientation  
Programmes, Refresher courses etc. \_\_\_\_\_
- \*vii) Faculty improvement programme \_\_\_\_\_
- \*viii) Any other type of training \_\_\_\_\_

VII. Participation in Extra mural Activities

- i) Extra-curricular activities - debates, cultural activities, counselling to students, Planning  
Forums , Union , NSS NCC, Scouting etc.
- ii) Service to community - Adult Education , Extension Service etc.  
\_\_\_\_\_  
\_\_\_\_\_

VIII. Help rendered in college administration by membership of various committees such as

..3....

IX. Any other information about contribution ( not conveyed above ) relevant to a proper assessment of activities \_\_\_\_\_  
\_\_\_\_\_

X. General Observations :-

i) Attendance

a) Regularity \_\_\_\_\_

b) Punctuality \_\_\_\_\_

ii) Student - teacher relationship \_\_\_\_\_

iii) Colleague relationship \_\_\_\_\_

iv) Class control \_\_\_\_\_

v) Reading Habits and other matters \_\_\_\_\_  
\_\_\_\_\_

Place : \_\_\_\_\_

Date : \_\_\_\_\_

\_\_\_\_\_  
Signature of the Lecturer

**PAGE 4 OF PROFORMA 'D-2'**

\* Evaluation by the Head of the Department or the senior most Lecturer in the Department or Principal

Item	Factual Verification		Evaluation				
	Correct	Exaggerated	Excellent	Very Good	Good	Average	Poor
**I							
**II							
III							
IV							
V							
VI							
VII							
VIII							
IX							
X							

Date \_\_\_\_\_

.....  
Signature of the Head of the  
Department or the senior most  
Lecturer in the Department or  
Principal

Observations of the Principal \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of the Principal

Date: \_\_\_\_\_

\_\_\_\_\_  
Seal of the College

# Confidential Assessment Form for Non-Teaching Staff

K.M.E. SOECITY'S, G.M.MOMIN WOMEN'S COLLGE, BHIWANDI, DIST. THANE

CONFIDENTAIL Form No. 6 (See Rule 12)

CONFIDENTIAL ASSESSMENT AND SELF ASSESSMENT REPORT OF NON-TEACHING EMPLOYEES

Serial No. : Year ending :

Name :

Department or Office including Section :

### PERSONAL INFORMATION

NAME : \_\_\_\_\_ FATHER'S NAME \_\_\_\_\_ SURNAME : \_\_\_\_\_

Date of Birth as recorded in the service book/ :

S.S.C. Cert./School Leaving Certificate.

Place of Birth :

Village      Town      Taluka      District      State.

Nationality and Religion :

Whether belongs to SC/ST/DT/NT/OBC/SBC :

Home Town (with residential address) :

Permanent Address (Local) :

Date of Joining College service and designation :

At the time of first appointment. :

Intermediary positions held between initial Appointment : Position Period from

Mother Tongue :

Language known :

Qualification and Degree :

University :

Year :

CONFIDENTIAL ASSESSMENT REPORT REGARDING ABILITY AND CHARACTER

Name : \_\_\_\_\_  
 Period of report : \_\_\_\_\_  
 Post or Post held during the period of report : \_\_\_\_\_  
 Department /Office/Section : \_\_\_\_\_  
 Leave taken during the period E.L./C.L./ : \_\_\_\_\_  
 M.L./MATERNITY LEAVE /OTHER LEAVE \_\_\_\_\_

PERFORMANCE ASSESSMENT

Sr. No.	ITEM	V.GOOD	GOOD	FAIR	AVERAGE	BELOW AVERAGE
		A	B	C	D	E
1	Technical Adequacy					
2	Industry					
3	Application					
4	Initiative					
5	Accuracy					
6	Punctuality in work					
7	Methodical and systematic working					
8	Promptness in disposal					
9	Regularity in attendance					
10	Relations with Superiors					
11	Relations with Colleagues					
12	Relations with members of public					
13	Dependability					
14	Capacity to get work done					
<b>II</b>	<b>GENERAL IMPRESSION</b>					
1	General impression and grasp					
2	Leadership qualities					
3	Level of knowledge (related to the Section/Department)					
4	Spl. Complementary aptitude qualities etc. other than job requirements.					
<b>III</b>	<b>RECOMMENDATION</b>					
a	Administrative ability including judgement, initiative, promptness, & drive					
b	Fitness to continue in the present					
c	Fitness for promotion					
d	Any other item not covered but which you would like to record. Please specify the aspect.					
e	Recommendation observation of the Reporting Officer.					

Date : \_\_\_\_\_  
 Place : Bhiwandi (Mr. Mushtaq Ali Patel)

OBSERVATION OF REVIEWING OFFICER IN THE REPORT

( To be filled in by the reviewing Officer )

1	Length of service under Reviewing Officer during the period under report.	
2	Do you agree with Reporting Officer or do you wish to modify or add to his assessment ?	
3	Observation of remarks to the employees and clarification from the reporting Officer sought, if any.	
4	Communication of remarks to the employees and clarification from the Reporting Officer sought , if any	

Date :

Place : Bhiwandi

(Dr. Moses J. Kolet)

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