

**Subject :- Format for Quarterly Performance Review Reports of Officers on probation / deputation / on higher position / continuing after attaining 58 years of age before July, 2005**

**in 02 copies**

**UTTARANCHAL JAL VIDYUT NIGAM LIMITED**

Performance Review Report for the Quarter Ending				
<b><u>PART-I: THIS PART TO BE FILLED IN BY HR DEPARTMENT</u></b>				
<b><u>EMPLOYEE DATA</u></b>				
1. Name of the Officer				
2. Designation				
3. Category ( <i>Tick relevant</i> )	Probation/Deputation/'Charge' of Higher Position/continuing after attaining 58 years of age before July,2005			
4. Date in respect of Sl No. 3 above				
5. Present place of work / posting				
6. Date of joining at the present place of work				
7. Whether character and antecedent have been verified ( <i>In case of probationers only</i> )				
Filled in by				
	Name	Designation	Date	Signature

<b><u>PART-II: THIS PART TO BE FILLED IN BY REPORTING/CONTROLLING OFFICER</u></b>				
TASKS/TARGETS ASSIGNED DURING THE PERIOD/QUARTER UNDER REVIEW (From _____ To _____)				
<b>TASKS</b>	<b>TARGET</b>			
1.	1.			
2.	2.			
3.	3.			
4.	4.			
5.	5.			
6.	6.			
Filled in by				
	Name	Designation	Date	Signature

**PART-III: THIS PART TO BE FILLED IN BY CONTROLLING/REPORTING OFFICER**  
**ASSESSMENT OF PERFORMANCE ON TARGETS/TASKS ASSIGNED BY THE**  
**CONTROLLING/REPORTING OFFICER**

S.No.	Factors	Rating ( on a 1-5 Scale)*				
		Excellent	Very Good	Good	Average	Poor
		5	4	3	2	1
1.	Job knowledge & skills					
2.	Performance: a) Quantitative b) Qualitative					
3.	Initiative & Resourcefulness					
4.	Cost consciousness					
5.	Ability to work in a team					
6.	Conduct and behaviour					
7.	Regularity and Punctuality					
8.	Desire to learn as exhibited by examples					

*\*(for extreme rating, give specific reasons/achievements/justification)*

- i. \_\_\_\_\_
- ii. \_\_\_\_\_
- iii. \_\_\_\_\_

Overall Performance Rating <i>(Please tick)</i>				
Excellent	Very Good	Good	Average	Poor

**INFLUENCING FACTORS**

- Has the employee been responsible for meritorious work deserving appreciation, if so, give detailed instances :-
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
- Areas of concern/short comings affecting/likely to affect the performance of the officer to be brought to his notice by the concerned GM/ED/Director for development / improvement:-
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**Recommendations(Please tick)**

1. Satisfactory completion of period under report

Yes	Not yet	No

2. If the period of probation / deputation / charge of higher position/continuing after attaining 58 years of age before July,2005 is to be continued:

Yes	No

If yes by \_\_\_\_\_ months.

**LIST OF TASKS/JOBS ASSIGNED FOR NEXT THREE MONTHS (From \_\_\_\_\_ to \_\_\_\_\_)**

TASKS	TARGET
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.

Filled in by				
	Name	Designation	Date	Signature

**PART-IV: THIS PART TO BE FILLED IN BY REVIEWING OFFICER**

I agree with the assessment of Reporting Officer

I do not agree with the assessment by the Reporting Officer for the following reasons:-

- i.
- ii.
- iii.
- iv.

**Overall Performance Rating (Please tick)**

Excellent	Very Good	Good	Average	Poor

Areas of concern/short comings as per opinion of Reviewing Officer which are affecting / likely to affect the performance of the officer to be brought to his notice by the concerned GM/ED/Director for development / improvement:-

- i. \_\_\_\_\_
- ii. \_\_\_\_\_
- iii. \_\_\_\_\_

Filled in by				
	Name	Designation	Date	Signature

**PART-V: THIS PART TO BE FILLED IN BY ACCEPTING/FINAL AUTHORITY**

Overall Performance Rating <i>(Please tick)</i>				
Excellent	Very Good	Good	Average	Poor

Areas of concern/short comings as per opinion of Accepting / Final Authority which are affecting / likely to affect the performance of the officer to be brought to his notice by the concerned GM/ED/Director for development / improvement:-

- i. \_\_\_\_\_
- ii. \_\_\_\_\_
- iii. \_\_\_\_\_

Filled in by				
	Name	Designation	Date	Signature

**PART-VI: THIS PART TO BE FILLED IN BY HR**

Communication of adverse entries, if any

Ref. Letter No.

Dated: