

**ANNUAL
PERFORMANCE ASSESSMENT REPORT FOR
CONTRACTUAL STAFF OF NSDMA
(District)**

(APAR)

**NAGALAND STATE DISASTER MANAGEMENT
AUTHORITY (NSDMA)
HOME DEPARTMENT**

Annual Performance Assessment Report for the period from

Section 1 – Basic Information

(To be filled by the individual)

1. Name of the officer reported upon :

2. Name of Department and 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		

9. Period of Absence :

	Period	Type	Remarks
On Leave			
Others			

10. Training Programme (s) Attended :

Date (From)	Date (To)	Institute	Subject

11. Awards/Honours :

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 officers, if any, and targets achieved. Exceptional contributions made e.g., in successfully completion of an extraordinarily challenging task or major systematic improvement (resulting in significant benefits to the public and/or reduction in time and costs) any 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 performances?

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>

5. Please specify the number of tours/inspections performed by you during the period under report (Applicable only in the case of field officers)

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

Date :

Signature of the officer reported upon

Section III – Assessment

1. Please state whether you agree with the self-assessment made by the officers 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 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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(This assessment should rate the officer vis-à-vis peers and not the general population. The reporting officers 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

Sl No.	Assessment	Reporting Authority	Reviewing Authority	Initially 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

Sl No.	Assessment	Reporting Authority	Reviewing Authority	Initially Reviewing Authority
1.	Attitude to work, sense of responsibility & maintainance 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

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

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

5. Summary

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 development activities of the officers 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 specially mentioned.

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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 development activities and his contribution towards the overall development of the district.

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

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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 initially)

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

3. Please comment on the overall qualities of the officer including areas of strengths and lesser strengths and his attitude towards the weaker section (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 is 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 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 rate 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 rate 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 column provided in that section along with initial.
9. There should be more openness in the system of Assessment. The APAR, including the overall grade in integrity, has to be communicated to the officer reported upon after it has been finalized by the cadre controlling authority/custodian of APARs.
10. The reporting authority shall be the concerned reporting officer, the reviewing authority shall be the Joint CEO, NSDMA and the accepting authority shall be the Secretary, NSDMA.
11. Section III is for the reporting authority, Section V is for the reviewing authority, Section VI is for the accepting authority.

Time Schedule for preparing of APAR
(Reporting year - Financial Year)

Sl 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 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