Name:		
Period	of APAR:	

# ANNUAL PERFORMANCE APPRAISAL REPORT FOR INDIAN CORPORATE LAW SERVICE OFFICERS

Performance Ap	to	
PART I:	PERSONAL DATA	
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(To be filled by the Administration Division/Personnel Department)

1.	Name of the office	r			
2.	Office of posting d	uring the period of report		×	
3.	Year of Joining G	roup 'A' Service			
4.	Whether the officer belongs to 'Scheduled Caste' or 'Scheduled Tribe'? If so, please state whether SC or ST				
5.	Date of Birth				
6.	Educational Quali	fication			
7.	Present Grade				
8.	Date of Continuous Appointment to the Present Grade				
9.	Present Post (Designation)				
10.	Date of Appointme	ent to Present Post			
11.	Name of Reporting	g, Reviewing and Accepting Authorities			
A	uthority	Name and Designation		Period worked	
Reportin	ng Authority				
Reviewi	ring Authority				
Acceptin	g Authority				

			Name: _ Period o	of APAR:
12. Period of absence.				
Particulars	Period	Туре		Remarks
On leave (Specify type)	,			
Others (Specify)				
13. Training Programme	s attended:			
From	То	Institute	Subject	/Programme
				*
4. Awards/ Honours, if a	any:		<u> </u>	
5. Date of filing the prop	erty return (IPR) fo	r the year ending De	ecember:	Should be linked to II module of SPARROW
	•			
nte:				•
		Admin	S istration/Pa	ignature on behalf o ersonnel Department

Name: Period of APA	Q ·
rend of ATA	Column or their months with the to
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PAR, available at the Ho	ne Page)
erform, in about 100 words	2)
minim, in about 100 Word.	·/
	-
	2

### PART II:

#### SELF-APPRAISA

(Please see Para 3 of the instructions for filling up of A

What language can you use professionally? 1.

i)	Write as well as Speak	
ii)	Speak only	
iii)	Write only	•

2. Brief description of duties:
(Objective of the position you hold and the tasks you are required to per

asks to be performed		Deliverable@	Actual Achiev	ement #
¥				-
	10			
eliverables refer to quantit tual achievement refers to anations for divergences a	o achievement a	against the specified of	escription of expected ou deliverables in respect	itputs. of each task
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3.

Annual work plan and achievement:

Period of APAR:

			Name: Period of APAR:	
5. Any exceptional contribution report.	or major syst	emic improvemen		eriod of the
	3			
,		, .		
6. Please indicate specific areas i programs:	n which you fe	eel the need to upg	rade your skills thro	ugh training
For present assignment:				
For long term career development:				

Name:		
Period	of APAR:	

### 7. Declaration:

Have you set the annual work plan for all officers for the current year, in respect of whom you are		Date:
the Reporting Authority?		
Have you undergone the prescribed medical		
checkup (for officers of and above the age of 40	Yes/ No	Date:
years)? If yes, please mention date and attach a		
copy of the Report in "Reference Upload" column		
below.		
Whether APARs of the previous year in respect of	Yes/No	Reasons:
subordinates staff working under you have been		
completed and forwarded within the prescribed		
time frame? If not, reasons therefore.	• .	
8. Please state briefly your participation in sen	inars etc. and also publica	tion of papers during the

completed and forwarded within the prescribe time frame? If not, reasons therefore.	1
8. Please state briefly your participation in se reporting period.	minars etc. and also publication of papers during th
,	
Reference upload: Browse	
Date:	Signature of the Officer Reported Upon:
Place:	Name: Designation:

Name:		
Period	of APAR:	

## PART III:

## APPRAISAL

						ř	
2.	Please comment on the	claim (if made	) of exception	onal cont	ribution by	the officer	reported
upon							
					-		
•	Has the officer reported	upon met with	any signific	ant failur	es in respec	t of his wo	·k? If ves
	Has the officer reported e furnish factual details.	upon met with	any significa	ant failur	es in respec	t of his wo	·k? If yes,
	Has the officer reported e furnish factual details.	upon met with	any significa	ant failur	es in respec	t of his wo	rk? If yes,
	Has the officer reported e furnish factual details.	upon met with	any significa	ant failur	es in respec	t of his wo	rk? If yes,
	Has the officer reported e furnish factual details.		any significa	ant failur	es in respec	t of his wo	rk? If yes,
	e furnish factual details.		·	ant failur	es in respec	t of his wo	rk? If yes,
	e furnish factual details.		·	ant failur	es in respec	t of his wo	·k? If yes,
	e furnish factual details.		·	ant failur		t of his wo	rk? If yes,
	e furnish factual details.		·	ant failur		t of his wo	rk? If yes,
3. oleas	e furnish factual details.		·			t of his wo	

*				Name: Period of APAI	₹:	-
4. Do you agree	with the skill up	-gradation need	ls as identified	by the officer rep		?
2		<u> </u>		7		
4 7						
5. Integrity: (Please see Para 4.5 o	f the instructions fo	or filling up of APA	AR, available at	the Home Page)		
	9			* :		-
Please comment (in alternation alternation and his/her at	bout 100 words) on titude towards wea	the overall qualitiver sections)	ties of the office	r including areas of s	Trenguis and	

Name:		
Period	of APAR:	

#### 7. Assessment of work output:

(This assessment should rate the officer vis-à-vis his/her peers and not the general population. Grades should be assigned on a scale of 1-10. Weightage to this section will be 40%).

SN	Parameter	Reporting Authority	Reviewing Authority	Initial of Reviewing Authority
i)	Accomplishment of planned work		-	
ii)	Quality of output			
iii)	Accomplishment of exceptional work/unforeseen tasks performed	. 4		
iv)	Adherence to the time limit in disposal of work			
Over	all average grading on 'Work Output'	_ +	=	
40% (Say	of overall average grading on Work Output 'A')			

### 8. Assessment of personal attributes:

(This assessment should rate the officer vis-à-vis his/her peers and not the general population. Grades should be assigned on a scale of 1-10. Weightage to this section will be 30%)

SN	Parameter	Reporting Authority	Reviewing Authority	Initial of Reviewing Authority
i)	Attitude to work			
ii)	Sense of responsibility	+		
iii)	Overall bearing and personality		i d	
iv)	Communication skills			
v)	Moral courage and willingness to take a professional stand			
vi)	Leadership qualities			
vii)	Punctuality			
Overa	all average grading on 'Personal Attributes'			and the second s
30% (Say	of overall average grading on Personal Attributes (B')			

Name:	
Period	of APAR:

Initial of

Reviewing

Signature of the Reporting Authority

Name:

Designation:

9.	Assessment	of	functional	competency	•
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SN

Date:

Place:

(This assessment should rate the officer vis-à-vis a larger population of his/her peers. Grades should be assigned on a scale of 1-10. Weightage to this section will be 30%)

Reporting

SN	Parameter	Reporting Authority	Authority	Reviewing Authority
i)	Knowledge of Laws/Rules/Procedures/IT Skills and awareness of the local norms in the relevant area	* .		
ii)	Strategic planning ability			8
iii)	Decision making ability			
iv)	Initiative			e e
v)	Coordination ability	:		2
vi)	Ability to motivate and develop subordinates/work in a team			
vii)	Delegation of work			
Over	all average grading on 'Functional Competency'			
	of overall average grading on Functional petency (Say 'C')			
0. II (01	Overall Grading by Reporting Authority i.e. 'A'+  a scale of 1-10):	'B'+ 'C' of ite	em number 7, 8	, and 9 of Part
	(Grading would be adequately justified in t	he Pen Picture at	Serial No. 6)	

Name:			
Period	of APAF	₹:	
Period	OI APAI	(;	way in tens

# PART IV:

1.

## REVIEW

1. Do you agree with the assessment made by the Reportin output and the various attributes in Part III? Besides, his assachievements and /or significant failures of the officer reported	sessment in respect of extraordinary
(In case you do not agree with any of the numerical assessment of attrib column provided in Part III).	outes please record your assessments in the
Yes, I agree No, I have recorded my asse	essment in Part III
2. In case of differences of opinion details and reasons for th	e same may be given.
3. Are you satisfied that the Reporting Authority has made hand after taking into account all the relevant material?	nis/her report with care and attention
4. Please comment (in about 100 words) on the overall qual strengths and lesser strengths and his attitude towards weaker so	lities of the officer including areas of ections (Pen Picture).
	, , , , , , , , , , , , , , , , , , ,
5. Overall Grading by Reviewing Authority i.e. 'A'+ 'B'+ 'C' (III (on a scale of 1-10):	of item number 7, 8, and 9 of Part
(Grading would be adequately justified in the Pen Pic	cture at Serial No. 4)
Place:	Signature of the Reviewing Authority Name: Designation:

						Name: Period of	APAR:	
V:			ACC	EPTANC	E			
Do you	agree with	the rema	rks of the I	Reporting / I	Reviewin	g Authorities		
		Yes				No		
In case	of differen	ce of opini	ion details	and reasons	for the s	same may be g	iven.	
	, ,							
		Do you agree with	Yes  In case of difference of opinions  The second	Yes  In case of difference of opinion details	Yes  In case of difference of opinion details and reasons	Do you agree with the remarks of the Reporting / Reviewing Yes  In case of difference of opinion details and reasons for the second sec	V: ACCEPTANCE  Do you agree with the remarks of the Reporting / Reviewing Authorities?  Yes No  In case of difference of opinion details and reasons for the same may be g	V: ACCEPTANCE  Do you agree with the remarks of the Reporting / Reviewing Authorities?  Yes No  In case of difference of opinion details and reasons for the same may be given.

Date: Place: Signature of the Accepting Authority Name:

Designation: