

# Confidential Character Roll (CCR) of Teachers of Universities of Jharkhand

## A. To be completed by the teacher:

Jharkhand Universities Services

(Applicable for teachers serving in **BBMK University, S.S.L.N.T. M. Mahavidyalaya** of Jharkhand)

Report for the period from.....to.....

### Section-I

#### Basic Information:

1. Name of the Teacher with Designation

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2. Highest Qualification: .....

3. How Employed: .....

4. Date of Joining: .....

5. Date of Birth: .....

6. Present Pay Scale with Grade Pay: .....

7. Present Post with Employee Id Number: .....

8. Date of appointment to Present post: .....

9. Period of absence of Leave/Lien etc.: .....

Absence	Period from	Period to	Type	Remarks
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On leave (specify type)

Lien (specify type)

Others reasons of

Absence (specify)

10. Training Programme Attended:

Date from	Date to	Institute	Subject
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11. Awards/Honor.....

# Performance Appraisal Report

## Section- II

### Self-Appraisal

(To be Filled in the Teacher)

1. Objection of the position you hold and the task you are required to perform, in about 50 words.
2. Annual work plan and achievement: (any work allocated by the authority)

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Tasks to be performed	Deliverables	Actual Achievement
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3. During the period under report, do you believe that you have made any exceptional contribution, e.g., successful completion of an extraordinarily challenging task of major systematic improvement (resulting in significant benefits to the public and/or reduction in time and costs)? If so, please give a verbal description (within 100 words):
4. What are the factors that hindered your performance (in about 100 words)
5. Please indicate specific areas in which you feel the need to upgrade your skills through training programs: (About 100 words).

### Section- III

1. Total period of teaching experience:

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Level	Name of Institutions	Major Topics	Your observation (if any)
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P.G. Classes  
(in years)

U.G. Classes  
(in years)

2. (i) Details of Lecturers, Tutorials, Practical, Contract hours Undertaken

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S. No.	Year	Course/ Paper	Level (PG/UG)	Teaching Mode	Lectures/ Tutorials/ Practical	% of allotted Classes
					Allotted	Undertaken
						Under -taken

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

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S. No.	Year	Brief Description
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- (iii) Examination-related Duties Assigned and Performed

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S. No.	Year	Nature of Examination Related work	Assigned number of day's	Actual number of day's performed
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#### **Section-IV**

##### **Co-Curricular, Extension And Professional Development Related Activities**

- (i) Student related co-curricular, extension and field based activities (such as extension work through NSS/NCC and other channels, cultural activities, subject related events, advisement and counseling). If not done State reasons.
- (ii) Contribution to corporate life and management of the department and institution through participation in academic and administrative committees and Responsibilities; if not contributed state reasons.
- (iii) Professional development activities (such as participation in seminars, conferences, short-term training courses, talks, lectures, membership of associations, dissemination and general articles). If not performed state the reasons.

## Section-V

### Research and Academic Contributions

- (i) Published Research Articles/Papers in Journals/Periodicals/Full Papers in Conference Proceedings; if not published State the reasons.

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S. No.	Title with page No.	Journal with ISSN & Publisher	Whether Refereed	Latest impact factor, if any	No. of Co-authors	Whether First/ Corresponding Co-Author
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- (ii) Books Published as Author/Co-Author/Text/ Subject or Reference Books/ Journals as Editor/Co-Editor/Text/Subject or Reference Books/Journals as Editor/Co-Editor/Chapters published in Books/Reference books/Edited books(other than journals) Books Translated and Published; if not published, state the reasons.

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Title of the Book	Whether Sole or Co-Author	Publisher (with city/ country) and year of Publication	ISBN	Whether Refereed
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- (iii) Research Guidance: M.Phil/Ph.D. degree and research guidance for UG projects under your supervision both as Guide and/or as Co-Guide: if not supervised/supervising state the reason;

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Name of Research Scholar	Registration No.	Title of Project	Present Status
M.Phil or equivalent			
Ph.D. or equivalent			
D.Sc/D.Lit			
UG/PG Research Project guidance			

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- (iv) Training Courses, Conferences, Seminar, Symposia, Refresher Course, Methodology, Workshops, Training, Faculty Development Programs, etc. attended. (not less than one week duration); if not attended state the reasons.

S. No.	Name of the Course/ Programme	Organised by	From..... To.....	Duration in weeks	Invited/ Participated On your own
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B. To be completed by the Competent Authority (Principal/HOD/Dean/Any Other)

1. Assessment of work output (Grades should be assigned on a scale of 1-10, in whole numbers, with 1 referring to the lowest grade and 10 to the best grade)

Description	Authority
Accomplishment of planned work	
Quality of output	
Accomplishment of exceptional work/unforeseen tasks	
Performed/Volumative	
<b>Overall Grading on 'Work Output'</b>	

2. Assessment of Personal Attributes (on a scale of 1-10)

Description	Authority
Attitude to work/Volunteer additional work	
Sense of responsibility	
Overall bearing and personality	
Emotional stability	
Communication skills	
Moral courage and willingness to take a professional stand	
Leadership qualities	
Capacity to work in time limit	
<b>Overall Grading on Personal Attributes</b>	

C. Certified that

Mr./Dr./Prof. ....has been working as .....in this Department since .....

The particulars given in this CCR Performa have been checked and verified from office records and documents enclosed are found to be correct.

Forwarding and recommendation of immediate Head/Supervisor/recommendation and forwarding of immediate Head/Supervisor.

Signature of immediate  
Head

Full Name  
Designation and office stamp  
Contact No.

Place:  
Date:

Recommendation and forwarding of the Head/Principal of the Institute.

Signature  
Full Name  
Designation  
Contact No.

Place:  
Date:

recommendation and forwarding of the Vice-Chancellor.

Signature  
Full Name  
Contact No.

Place:  
Date: