Part-I

<u>Confidential</u> <u>Office of the Vice Chancellor-KGMU, UP, Lucknow.</u>

<u>Proforma for Faculty Members for submitting the Annual</u> <u>Achievement & Contribution at KGMU, UP, Lucknow (July to June each year)</u>
Name:
Department:
Complete Address:
Mob.Email
Present Position:
Permanent/Temporary/On Contract:
Date of attaining the present position.

<u>Information on inputs for Patient care, teaching, research,</u> <u>Administration and other extra curricular activities</u>

(July.....to June.....)

Clinical work:

OPD No. of Hours/Week

OT: Number of Hours per week

Indoor Ward Rounds: Hours/week

Teaching UGs/PGs Hours/week

No. of Postgraduate students registered under you as:

Chief/ Co-guide:

No. of Ph.d/M.Phil Students working with you as Guide/Co-guide:

Non Clinical Faculty

Field of Interest: Labs: ongoing-established/upgraded:

Inter and Intra departmental projects:

Inter and Extra Mural Projects:

Basic research projents undertaken:

Research Activities:

Paper published in Indexed & Non Indexed Journals:

Papers abstracted:

Book published:

Conferences attended in India:

Conferences attended in overseas:

Total No. Papers/Posters Presenting during the conferences:

Guest Lectures delivered during the CME Program/Workshops:

Research Projects ongoing/completed during the year:

Significant events:

Titles, Medals, Awards and Honors received:

Membership of the societies awarded:

Editor of the journals:

Conferences Organized:

Visiting Professors/Guests speakers invited to the department"

Serving as member of the National and International Expert Group:

Extra Curricular activities:

Other duties asked by the KGMU Administration:

Anything that prevented you from achieving the best during the year:

Signature:	Date:
Name:	

Note:

- 1. Each faculty should submit the proforma by July 15.
- 2. The proforma forms the basis to record the achievements and the contributions made by the faculty during the year.
- 3. All the faculty members should submit the proforma duly filled through their respective Head of the department. Those who are working on contract, should submit the same direct.
- 4. It would be presumed that the faculty has not contributed anything if they fail to comply & submit their details.

Part-II

(To be filled by teacher to be reporting Officer)

For the year to			to.	vear	the	For
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- 1. Length of service under Reporting Officer:
- 2. Proficiency in teaching (subject taught):
- 3. Give your assessment commenting Upon the following:
 - (a) Knowledge of subject taught:
 - (b) Command and fluency over language:
 - (c) Initiative, drive and resource fullness:
 - (d) Organizing ability:
 - (e) Class room control and confidence:
 - (f) Lecture delivery capability:
- 4. Share of responsibility in the conduct of:
 - (a) Extracurricular activities:
 - (b) Initiative and Drive:
 - (c) Other responsibility (exam/administrative):
- 5. Capacity and ability to response to carry out Responsibilities assigned:
- 6. Capacity to assume higher responsibility:
- 7. Temperament/Courtesy:
- 8. Punctuality in attendance:
- 9. Relationship with:
 - (a) General Public/patients: t
 - (b) Colleagues:
 - (c) Students:
- 10. Attitude towards students:(Comment on the teachers understanding)and response to the problems of the Students
- 11. State with details if the teacher was given Assignment other than the routing assignment. If yes, state his capability to undertake the assignment:
- 12. Administrative ability:

- 13. State, with details, if the teacher has been Punished/reprimanded/warned: Not applicable during the period under report.
- 14. State with details, if teacher have received any Commendation during the period Under report:
- 15. State of Health:
- 16. Over all grading (Tick mark as appropriate and Strike off the others)

Outstanding/very good/good)
Average/below average

(A teacher should no be graded outstanding unless exceptional qualities and performance have been noticed ground for giving such a grading be clearly brought out)

Signature of the reporting authority

Name in full:

Designation: Dean (Medical)

(During the period of report) July 1, 2017 to June 30, 2018

Part-III

(Review by the Reviewing Authority)

- 1. Length of service Under the: Reviewing Authority.
- 2. Do you agree with the remarks of the: Reporting Authority, if No Indicate reasons therefore.
- 3. Do you have any special comment to offer?
- 4. Do you agree with the overall grading, done by the Reporting Authority?

5.

Signature of the reviewing authority

Place:	Name in full:
Date:	Designation

KING GEORGE'S MEDICAL UNIVERSITY, U.P, LUCKNOW CONFIDENTIAL REPORT

Proforma for Employees for submitting the Annual Achievement & Contribution at KGMU, UP, Lucknow

REPORT FOR THE PERIOD ENDING YEAR----- TO -----

Part-I (PERSONAL DATA) (To be filled by the Employee)

- 1. Name Of Employee:
- 2. Designation:
- 3. Present post held & date of appointment there to:
- 4. Period of Leave Without Pay During this Period if any:
- 5. Training/Workshop Attended During this period with detail thereto:
- 6. Any special Achievement/Award during the period :

(Signature of the Employee)

Part-II (Assessment by the Reporting Officer)

D	C	В	A	A+
Poor	Average	Good	Excellent	Outstanding

*1	Note- Please assign the grades for the points (1-8) as	s per given ma	trix.
Ge	eneral Assessment regarding work		
1.	Knowledge of work entrusted:	•••••	
2.	Quality of work preformed:	•••••	
3.	Commitment to work assigned:	•••••	
4.	Devotion to duty:		
5.	Initiative:		
6.	Willingness to accept responsibility:	• • • • • • • • • • • • • • • • • • • •	

/.	Relation with C	coneagues an	a patients/pu	DIIC:	•••••		
3.	Punctuality and	d availability	on seat:				
9.	If the employee						
	during the peri-	od, If any det	ail about it:		NO Adverse Entry Found As		
					Per service book record.		
10.	Integrity (Certi	fied/Not Cer	tified):				
11.	. Recommendation for During this period						
	(Suspension/Termination/Department/Judiciary enquiry): NO (As per Service book						
					Record)		
12.	Any other:						
	1. Overall Rating: Poor/Average/Good/Excellent/Outstanding:						
	(D)	(C)	(B)	(A)	(A+)		

Signature of Head of the Deptt. (With Rubber Stamp)