

अखिल भारतीय आयुर्विज्ञान संस्थान ALL INDIA INSTITUTE OF MEDICAL SCIENCES मंगलगिरि, आंध्रप्रदेश

MANGALAGIRI, ANDHRA PRADESH

www.aiimsmangalagiri.edu.in

Date: 17.04.2025

Office of the Dean (Academic)

AIIMS/MG/Dean (A)/2025/

CIRCULAR

Sub: Annual Performance Assessment Report for Faculty for the year 2024-25 called for – Reg.

Head of Departments/Units are requested to initiate Annual Performance Appraisal Reports of Faculty Members for the period from, 01.04.2024 to 31.03.2025.

Hence, the Heads of Department/Cells/ Branches may please ensure that all the regular employees working in their section have to collect these APAR Blank forms from our website at (https://www.aiimsmangalagiri.edu.in/official-downloads) and forward the filled forms as per the below time schedule.

The following instructions may be followed while filling/reporting/reviewing APARs:

- 1. It is the collective responsibility of the officer and the reporting/reviewing officer to submit the APAR form duly completed in all respects with the accepting authority within the due date.
- 2. Head of the Departments should ensure that APARs for all the officers who have put in at least 3 months of service in the institute during the reporting period have been submitted, irrespective of whether the officer is still serving, has left service, or has proceeded on fellowship/study leave/deputation, etc.
- 3. All the details in Part-I & II of the report to be handwritten legibly with pen or typed in by the concerned officer, ensuring that none of the columns is left blank.
- 4. Officers are expected to provide the following as typed annexure:
 - (a) A list of publications during the period under review separately for those included in PubMed and those not included in PubMed.
 - (b) A list of intramurals and/or extramural funded projects running at any time during the period under review.
- 5. In case an officer fails to submit the APAR in due time for reporting (i.e., by June 30th, 2025), the reporting officer will submit the APAR of the particular officer with the information available in the department.
- 6. The reporting/reviewing officer must ensure that the concerned officer has provided complete information for Part-I & II of the report and that none of the columns is left blank. The name and designation of the reporting/reviewing officer are to be written in block letters along with the date.

7. Channel of reporting/reviewing officers will be as under:

Designation	Reporting Officer	Reviewing Officer	Accepting Authority	
Head of the Department	Dean (Academic)	Director	President	
Professors				
Additional Professors	Head of the	Doon (Academie)	Director	
Associate Professors	Department	Dean (Academic)		
Assistant Professors				
Principal (College of Nursing)	Dean (Academic)	Director	President	
Associate Professors (Reader)	Principal (College of Nursing)	Dean (Academic)	Director	
Lecturer (Assistant Professors)	Principal (College of Nursing)	Dean (Academic)	Director	
Nursing Tutor / Clinical Instructor	Principal (College of Nursing)	Dean (Academic)	Director	
Tutor / Demonstrator	Head of the Department	Dean (Academic)	Director	

8. Time schedule for submission of APAR will be as under:

S. No	Nature of Action	Deadline
1	Blank APAR forms available on website (by download)	15.05.2025
2	Submission of Self-Appraisal to reporting officer	15.06.2025
3	Forwarding of report by reporting officer to reviewing officer	15.08.2025
4	Completion by the Reviewing officer and disclosure to the officer reported upon	30.09.2025
5	Final submission for acceptance	31.10.2025

Everyone is requested to ensure timely submission of APARs before the due date at each step so that the process can be completed in time.

This is issued with the approval of competent authority.

Sd/-Dean (Academic) AIIMS Mangalagiri.

To:

All Faculty, Nursing College Faculty.

Copy for information:

- i) All Deans, AIIMS Mangalagiri
- ii) DDA/MS/DMS/Principal, College of Nursing, AIIMS Mangalagiri.
- iii)PS to Director/PS to Deputy Director, AIIMS Mangalagiri.
- iv) IT Cell, AIIMS Mangalagiri.
- v) Guard file.

अखिल भारतीय आयुर्विज्ञान संस्थान

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

मंगलिगरि , आंध्रप्रदेश - 522503

Mangalagiri, Andhra Pradesh - 522503 (CONFIDENTIAL REPORT)

(For all academic personnel of and above the Grade of Lecturer and equivalent grades i.e. Lecturer, Assistant Professor, Associate Professor, Additional Professors and Professors)

Report on Dr.	Department of
For the period from	
Date of Joining at A.I.I.M.S:	Date of posting to present Department:
Present designation:	Date of appointment to present position:
Whether on probation:	Date of acquiring the present salary:
Present salary	

PART-I

(To be filled in by the officer whose work is being reviewed)

ACADEMIC ACHIEVEMENTS:

(State your academic achievements that are noteworthy for the year. This may include academic awards, admission to fellowships of academics etc.)

NATURE OF WORK:

on which you have been engaged during the period of this report: Teaching Research, Patient care etc.

Reference may be made here to any particular achievements outside the scope of your official duties such as service to the cause of Medical Education or Community Welfare or National and International Service. Mention may also be made to contributions made to the work of the Institute outside the scope of normal duties such as work on faculty, committees, organization of seminars, symposia, special lectures, looking after the department stores and other administrative work in the department.

work in the department.				
(Be brief and to	the point; the number of words MUST NOT exceed 50)			
ACTUAL WORK LOAD:	If your involvement in I & II below is only periodic then state the total period spent in hours per year, otherwise mention the			

period as desired).

I. **CLINICAL LOAD:**

Furnish hours per week/year spent by you in:

- a). Patient care in outpatient service:
- b). Patient care in inpatient service:
- c). Patient care in special clinics (name the clinic)
- d). In operation theatre:
- In the case of non-clinical service departments (Pathology, Microbiology, Pharmacology, etc. e). indicate work-load you carry per year:

II. TEACHING: (For the whole year)

1. <u>UNDERGRADUATE</u>

- a. No. of lectures/seminar allotted to you
- b. No. of lectures/seminars taken by you
- c. Hours per week/year spent in clinical teaching, demonstrations / tutorials.

2. **POSTGRADUATE**

- a. Hours per week spent in clinical teaching, seminars, conference, journal club etc.
- b. No. of postgraduate students writing, these under you as a chief or as a co-supervisor.
- c. No. of postgraduate students working in your unit/department of professional training.
- **RESEARCH** (Use separate sheet for this column).
 - a. Title of research projects in which you have been involved in the previous year as:
 - 1. Chief Investigator
 - 2. Co-Investigator
 - b. Title of research projects in which you were involved during the year under review as:
 - 1. Chief Investigator
 - 2. Co-Investigator
 - c. List your publications (Attach separate sheet if there is more than one publication. Name of all authors, with full details of each paper must be mentioned. Standard format as under should be used; "Pankaj SG., Sharma YR, Vane JR. (2010) Prostacyclin reduces the number of 'slow moving' leucocytes in hamster check pouch venules J. Physiol. 280: 633"

- d. List of papers presented by you in conference (Name the conference and attach separate sheet).
- e. List of papers, with you as the coauthor presented in the conferences.
- f. No. of Ph.D/D.M./M.Ch. Students working under you as chief or cosupervisor.
- g. Please mention briefly the problems which hampered you from achieving the best you can.

SUMMARY:

Sum up your contributions during this period in the various fields indicated above and state what you think to be your most significant achievements.

(Be brief and to the point; the number of words much not exceed 100)			

Signature please:

Report on: Dr		
---------------	--	--

PART-II

(To be field in	by the l	Reporting	Officer)
-----------------	----------	-----------	----------

Reporting Officer's name:
Designation:
Department:
Length of service put in by the officer being reported or under the Reporting Officer.
FromApril toMarch

(Record remarks in respect of only such qualifications of which you have first-hand knowledge. Please be precise and brief. Each statement is to be commented on separately).

I. **INTEREST**:

II. RESEARCH ABILITY:

- i. Interest in research.
- ii. Theoretical ability and the capacity to interpret data.
- iii. Experimental and Practical ability
- iv. Originality, Capacity to produce new and good ideas

III. TEACHING ABILITY:

- i. Interest in Teaching
- ii. Power of expression, Ability to express him-self clearly and concisely.
- iii. Punctuality and regularity at assigned sessions/seminars.
- iv. Effectiveness, as a teacher/ as judged by peer rating /students rating.
- v. Knowledge of current advances in his/her subject.
- vi. Popularity with the students.

IV.	PROFESSIONAL COMPETENCE	

i.	General professional knowledge whether wide, thorough and up-to-date.				
ii.	Competence in clinical skills or laboratory skill pertaining to his discipline.				
v.	ADMINISTRATIVE ABILITY				
i.	Organizing ability :				
ii.	Initiative and drive :				
iii.	Capacity to work in a team :				
iv.	General administrative efficiency :				
Repor	Assessment of the Officer's overall grading of work in his/her particular position: i) Exceptionally brilliant ii) Outstanding iii) Well above average standard iv) Good average man v) The average men fairly competent but without special ability or initiative vi) Insufficient initiative and capacity for work without constant supervision vii) Indifferent but just worth retaining viii) Not worth retaining in the present position. ng should be recorded by the ting Officer amongst the above grading				
(Make out. D	any general comments you think desirable e.g. special remarks on any characteristics not brought o you agree with the officer's own account of work recorded in this report or is there anything sh to modify or add)?				
	Signature of Reporting Officer (With Official seal)				

Designation.....

Date:.....

NOTES FOR GUIDANCE OF REPORTING OFFICER:

- 1. The preparation of reliable reports on the staff is an exceedingly important duty. In fairness to the staff reported on, as in the interest of the smooth and efficient working of the Department and the Institute, reports should be carefully and critically made. Reporting Officer should not discuss his assessment with anyone, except the Reviewing Officer, if he requires you to do so.
- 2. Concentrate on one factor at a time and study the implications of each factor carefully. Do not feel obliged to mark under every heading, as some of the headings may be inapplicable. Do not attempt to guess any quality, which you have not been able to judge at first hand. In such cases, make no marking at all.
- 3. Do not be afraid of giving low markings if they are called for. No one can equally good in every way and some low markings may be justified even for the most brilliant.
- 4. Markings should not take account of age.
- 5. Do not allow any personal feelings to govern the assessment. The assessment requires the appraisal of an officer in terms of his ACTUAL PERFORMANCE.

PART-III

I.	REPORT	BY RE	EVIEWI	NG OF	FICER:

- 1. Do you agree with the officer's own account as recorded in this report?
- 2. Do you agree with the observations of the Reporting officer?
- 3. Do you agree with the reporting officer's overall assessment of the officer reported upon/Column VI of the Part II.
- 4. Assessment of Integrity.
- 5. Has the officer been informed of any markings below 'Normal' with which you agree? If he/she has not been, please state why?
- 6. General remarks by reviewing officer, including a note of any particular achievement.

Signature of Reviewing Officer	
(with Official seal)	
Designation	
··· •	
Date:	

Note:

The Reviewing Officer should normally discuss the adverse markings which are below "normal" with the Reporting Officer and should make suggestions for improvement, to the reporting officer and, if necessary with the officer reported upon and therefore, record his remarks against Column 5 and 6 above.

PART-IV

I. REPORTED BY ACCEPTING AUTHORITY:

- 1. Do you agree with the officer's own account as recorded in this report?
- 2. Do you agree with the observations of the Reporting Officer/ Reviewing Officer?
- 3. Do you agree with the Reporting/Reviewing Officer's over assessment of the officer reported upon?
- 4. Assessment of Integrity.
- 5. Has the officer been informed of any markings below "Normal" with which you agree, if he/she has not been, please given reason thereon?
- 6. General remarks by the Accepting Authority including a note of any particular achievement during the assessment period.

gnature of Accepting Officer
With Official seal)
,
esignation
8
ate:

Note:

The Accepting Authority should normally discuss, in case the adverse marking which are below "Normal" with the Reporting Officer/Reviewing Officer and should make suggestions for improvement, to the reporting officer and, if necessary, the officer reported upon should be counseled thereon, record his remarks/adverse remarks/ below bench mark against Column.