



అఖిలభారతవైద్యవిజ్ఞానసంస్థమంగళగిరి, ఆంధ్రప్రదేశ్
अखिल भारतीय आयुर्विज्ञान संस्थान, मंगलगिरि, आंध्रप्रदेश
All India Institute of Medical Sciences, Mangalagiri, Andhra Pradesh.
(An Autonomous Institute under MoHFW, Govt. of India)

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**CONFIDENTIAL REPORT FOR CLEARANCE OF PROBATION PERIOD OF
NON- TECHNICAL CADRES**

PART -I

1. Name of the employees : _____
2. Designation : _____
3. Academic & Professional : _____
Qualification _____
4. Scale of pay : _____
5. Date of joining in the Institute : _____
6. Date of joining in the present post : _____
(i) Duration of Probation Period : 2 YEARS
7. Period of Probation Expiring (Initial):
8. If extended, date of expiry of Probation : Ist Ext. :
IInd Ext. :
IIIrd Ext. :
9. Period for which the present report Pertains : From _____
To _____
10. Place of posting during Probation Period : Place :
From :
To :

Probation Report of Shri _____

PART-II

For the use of Reporting Officer

1. Brief Description of job performed:
2. Job Knowledge:
3. Job Performance:
 - (i) Contribution towards Organization of work:
 - (ii) Quality of work:
 - (iii) Contribution towards work of the Unit/Office:
 - (iv) Relation with fellow employees:
 - (v) Adaptability for new job:
 - (vi) In case the reporting officer is not satisfied with the work and conduct of the employee reported upon during the initial period of probation, Please specify: :
 - (i) Whether the deficiencies reported in the Probation report were communicated to him well in advance, if communicated in writing, Please specify: :
 - (ii) Whether the employee was given adequate counseling and guidance to overcome his deficiencies. :
 - (vii) (TO BE COMPLETED IN CASE THE REPORT PERTAINS TO EXTENDED PERIOD OF PROBATION)

Please highlight his significant contribution/improvement or deterioration observed in his working during the period under report. Please also confirm whether the employee was given adequate counseling guidance to overcome his deficiencies.

Date _____

Signature of Reporting Officer _____

Designation _____

Probation Report of Shri _____

PART-III

Remarks of the next Higher Officer

1. General Assessment:

2. Whether he be treated to have completed to period of Probation Satisfactorily? :

Signature _____

Date _____

Designation _____

Remarks by CAO/SAO/AO

1. Whether character and antecedents have been verified and found to be in order?

2. Whether any disciplinary case is pending or under process against the employee?

Signature _____

Date _____

Designation _____

Order of the Appointing Authority/Counter Signing Authority:

Recommended / Not Recommended

Signature _____