## ANNUAL PERFORMANCE BASED APPRAISAL SYSTEM FOR FACULTY(PBAS)

For the Period from	to
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#### **PART A: GENERAL INFORMATION**

- 1. Name of the Faculty Member (in Block Letters):
- 2. Father's Name/ Mother's Name:
- 3. Date of Birth:
- 4. Educational Qualifications including professional and technical qualifications:
- 5. Department:
- 6. Current Designation:
- 7. Address for correspondence:
- 8. Permanent address:

Mobile Number:

Email:

- 9. Date of continuous appointment in the institute:
- 10. Date of appointment to the present post:
- 11. Total experience and tenure in this institution:
- 12. Period of absence from duty (leaves availed, training etc during the year. (If he/she has undergone training, please specify)
  - 13. Whether acquired any degrees or fresh academic qualifications during this year:
  - 14. University level short term/long term orientation courses/ Refresher courses attended during the year:

Name of the	Place	Duration	Sponsoring agency
course			

#### PART –B: ACADEMIC PERFORMANCE INDICATORS

#### **CATEGORY I: TEACHING-LEARNING AND EVALUATION RELATED ACTIVITIES**

i). Maximum no. of periods per course available and Teaching work load in each Semester as per Time – Table (Theory& Practical)

Even	B.Ph Cour		B.Ph Coui	arm rse 2		Pharm urse 1	M.Pł Coui	nam rse 2	Phar Cour			rm D rse 2
	Т	Р	Т	Р	Т	Р	Т	Р	Т	Р	Т	Р
Available periods												
Work load												
Odd semester	B.Ph Cour		B.Ph Coui	arm rse 2		harm Irse 1		narm rse 2				
	Т	Р	Т	Р	Т	Р	Т	Р				
Available periods												
Work load												

<sup>\*</sup>Course denotes subject

ii)Extra tutorial classes or Remedial classes workload:

iii) Reading or Instructional material developed and additional knowledge resources provided to students

S.No	Course	Developed/Consulted	Prescribed	Additional
				resource
				provided

- iv) Use of Innovative Teaching-Learning Methodologies and Course improvement:
- v) Examination duties assigned and performed

S.No	Type of Examination	Duties Assigned	Extent of
	Duties		performance (%)

### **CATEGORY I: Assessment**

	i	ii	iii	iv	V	Total
Faculty						
Principal						

# CATEGORY II: CO-CURRICULAR, EXTENSION, PROFESSIONAL DEVELOPMENT RELATED ACTIVITIES

S.No	Type of	Activity	Avghr/week
	i)	Extension, Co-cirricular&Communal activities	
	ii)	Administrative responsibilities	Yearly/Semester wise
			Responsibilities
	iii)	Professional Development activities	

### **CATEGORY II: Assessment**

	i	ii	iii	Total
Faculty				
Principal				

# CATEGORY III: RESEARCH, PUBLICATIONS AND ACADEMIC CONTRIBUTIONS

# A)Published papers in Journals

S.No	Title	Journal	ISSN/ISBN No	Indexing/ Impact factor if any	Number of co-authors	Whether you are the main author

### B)Books/Articles/Chapters Published

S.No	Title with page numbers	Book title, editor&publisher	ISSN/ISBN No	Whether peer reviewed	Number of coauthors	Whether you are the main author

## C) Ongoing and completed research projects and Consultancies

S.No	Title	Agency	Period	Grant/Amount (Rs Lakh)	Status

# D) Research guidance

S.No	Number enrolled	Thesis submitted	Degree awarded
B.Pharmacy			
M.Pharmacy			
PhD			
Pharm D			

# E) i)Training courses, Teaching-Learning-Evaluation technology programs, Faculty Development Programmes (not less than 1 week duration)

S.No	Programme	Duration	Organized by		

## ii)) Papers presented in conferences, seminars, workshops and symposia

S.No	Title of the	Title of the	Organize	Whether
	paper	conferenc	d by	national/international/state/college/Univer
	presented	e/seminar		sity

# iii) Invited lectures and Chair ships at national/international/university conferences/seminars

S.No	Title of the paper presented	Title of the conferenc e/seminar	Organize d by	Whether national/state/college/Univer sity

Note: Necessary supporting documents should be submitted along with this form(certificates and other proofs)

#### **CATEGORY III: ASSESSMENT**

	Α	В	С	D	E i)	E ii)	E iii)	Total
Faculty								
Principal								

Signature of the faculty

Name in Block letters:

Designation

Email:

DatE:

#### Assessment of the Head of the Institution

Name & Designation of the Head of the Institution:

Length of service under the Head of the Institution:

### **PART C. Performance and GeneralAttributes** (Weightage – 50)

Assessment on Five Point scale

- (i) Knowledge in the sphere of work
- (ii) Quality of output
  - Result analysis (individual subject):

(If the result is very poor= 0, poor= 1-2, satisfactory=3-4, excellent=5)

<ul> <li>Mentoring ability (class wise):</li> </ul>
(iii) Communication and presentation skills (Oral and written)
(iv) Initiative and adaptability (resourcefulness
in handling normal and unforeseen problems
and willingness to take responsibilities in
the new area of work)
(v) Aptitude to work
(vi) Ability to inspire and motivate
(vii) Supervisory ability
(viii) Interpersonal relations and team work
(ix) Integrity and Trustworthiness
(x) General conduct
Total (B) :
C. General assessment taking all the above parameters
Total (B + C) :
Signature of the Head of the Institution and Seal :
REMARKS BY CHAIR: Any contribution to institutional image: Yes/No
Overall role and responsibility: Satisfactory/Unsatisfactory
Signature
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