## HIMACHAL PRADESH GOVERNMENT' EDUCATION DEPARTMENT ANNUAL CONFIDENTIAL REPORT OF PRINCIPAL /HEAD MASTERS

(School Cadre only)

of_	for the year		
	PART-1 PERSONAL DATA (To be filled by the Principal/Head Master/School)		
1.	Full Name (in capital letters)		
2.	Designation		
3.	Qualification:  (a) Academic (b) Professional (c) Research Degree		
4.	Date of Birth		
5.	Date of appointment (in school cadre)		
6.	Date of appointment as Principal/Head Master		
7.	Basic Pay		
8.	Institution where working		
9.	Period of absence from duty on leave/training etc. during the year under report.		
	PART-II SELF APPRASL	AL	
	What do you think has been your most important contribution this year and why?		
I	Have you published any Research Paper/book? if yes, please indicate number of volume & address of Journal.		
12.I	Do you delegate all responsibilities to all		

members of the staff or to a few members?								
13.Do you decide all school issues your self or you take the opinion from other members of the staff?								
14. What activities did you initiate to develop Parent Teacher relationship?								
15. Steps taken by you during the year for a) Teacher Welfare b) Student Welfare								
16. (a) Average pass percentage of all classes of the school separately.								
- CI			In a	In 10/				
Class	No. of students appeared	No. passed	Pass %age	Board %age	Reasons for variation			
(b) A	cademic standard.							
,								
17. Significant honour/distinction won by your school.								
in Se	id you direct and par any Inservice Refres eminar etc. during the yes, give details.	sher Course/						
pro	e you office bearer/n ofessional, education ganisation? if yes, gi	al Literary or social						
	I you receive any printed during the year?	ze, honour or						

	os have been taken to improve ool Campus and Co-curricular s?	
22. Did you h	nold annual school day this year?	
23. Any ot	ther significant point.	
		Signature of the Principal/Head Master (school)
PAR	T-III ASSESSMENT BY THE RE	PORTING OFFICER
•	essment of this part should not be indepressed in suitable words.)	icated by tick marking but should
officer for disa	gree with the resume of work as indice in Part-II of the Report? if not, indice agreeing with it and the extent of you be ement.	rate reasons
25. STATE	OF HEALTH:	
	eal: nergetic Poor health	
(b) Menta	1:	
(i) Al (ii)	lert Slow	
(c) Emot	tional Balances:	
(i)	Is he calm and retains poise?	
(ii)	Does he get provoke easily?	
(iii)	Is he able to tolerate differenc es of opinion?	

26.	Intelligence and Understanding:
2 7.	Quality of work: -  (i) – Attention to details:  – Accuracy in presentation, -  - Thoroughness in analysis:
(ii	) Professional Judgement:
	(iii) Knowledge of office procedures,
	rules, codes, manual, instructions etc.
(iv	Ability in discussion & conversation:
(v	Presentation of cases and expression on paper:
(vi	Disposal of work:
(vi	ii) Study habits:
(v	iii) Zeal, Diligence & Sense of responsibility:
(i	x) Organising and executive ability:
28.	Social Adjustment:
29.	Relationship with subordinates.
30.	Ability in public relations:
31.	Ability to inspire confidence to get the best out of his colleagues:
32.	Does he/she take interest in use of Hindi language in official work:
33.	His attitude towards the members of S.C.& S.T. community:
34.	Reputation for integrity during the period under report (if doubtful or negative give reasons.)
35.	Has any incident occurred during the period under report which reflects credit/discredit on the officer?
36.	General Remarks:- Outstanding/Very good/Good/ Average/Below Average:
	Signature of the Reporting Officer Name in block letters

Designation .....

## PART-IV REMARKS OF THE REVIEWING OFFICER

37.

Do you agree with the Reporting Officer's resume of the work done as contained in Part-III of

	the report? If not, indicate briefly the extent of disagreement:	the reasons for disagreeing with the Reporting Officer and
38.	Over all assessment Outstanding/Very Good/Good/Satis:	factory/Poor
	Outstanding/very Good/Good/Satis.	factory/1 doi:
		Signature of Reviewing Officer
		Name in block letters
		Designation
Co	ountersignature by the next higher Offi	cer with remarks if any:
		Signature of the Countersigning Officer
		Name in block letters
		Designation
		Date