

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

(School Cadre only)

Appraisal of work & conduct of Shri/Smt./Kuinari

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 APPRASIAL**

10. What do you think has been your most important contribution this year and why?

11. Have you published any Research Paper/book? if yes, please indicate number of volume & address of Journal.

  

12. 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.

Class	No. of students appeared	No. passed	Pass %age	Board %age	Reasons for variation

(b) Academic standard.

17. Significant honour/distinction won by your school.

18. Did you direct and participate in any Inservice Refresher Course/ Seminar etc. during the year? if yes, give details.

19. Are you office bearer/member of any professional, educational Literary or social Organisation? if yes, give details.

20. Did you receive any prize, honour or award during the year?

21. What steps have been taken to improve the School Campus and Co-curricular activities?

22. Did you hold annual school day this year?

23. Any other significant point.

Signature of the Principal/Head Master (school)

### PART-III ASSESSMENT BY THE REPORTING OFFICER

(Note: - Assessment of this part should not be indicated by tick marking but should be clearly expressed in suitable words.)

24. Do you agree with the resume of work as indicated by the officer in Part-II of the Report? if not, indicate reasons for disagreeing with it and the extent of your disagreement.

25. STATE OF HEALTH:

(a) Physical:

(i) Energetic

(ii) Poor health

(b) Mental:

(i) Alert

(ii) Slow

(c) Emotional Balances:

(i) Is he calm and retains poise?

(ii) Does he get provoke easily?

(iii) Is he able to tolerate differences of opinion?

26. Intelligence and Understanding:
27. 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:
- (vii) Study habits:
- (viii) Zeal, Diligence & Sense of responsibility:
- (ix) 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 reasons for disagreeing with the Reporting Officer and the extent of disagreement:

38. Over all assessment. -  
Outstanding/Very Good/Good/Satisfactory/Poor:

Signature of Reviewing Officer

Name in block letters

Designation

Countersignature by the next higher Officer with remarks if any:

Signature of the Countersigning Officer

Name in block letters

Designation

Date