



Annexure I Faculty Annual Appraisal

All members of faculty are expected to submit the appraisal form within the due date and by default it should be on or before the date of joining in NSRIT. The appraisal will be reviewed by two reviewers i.e. Reviewer 1 (Respective Head of the Department) and Reviewer 2 (Competent Authority).

| | | | | | |
|--------------------------|---|--|------------------------------------|---|--|
| Name of the Employee | : | | DoJ | : | |
| Employee Code | : | | Date of Submission | : | |
| Department | : | | Designation at the time of Joining | : | |
| Total exp. At NSRIT | : | | Present Designation | : | |
| Qualification (@Joining) | : | | Qualification (@ Present) | : | |

Part A (Academics)

Academic Year: 2020 – 2021

A. 1. Academic Performance

| Semester 1 (Courses) | Students' Details | | | | Students' Feedback on 5 pt. scale | HoD's Remark |
|----------------------|-------------------|--------|------------------------------|---|-----------------------------------|--------------|
| | Enrolled | Passed | No. of failures ¹ | % | | |
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |
| Semester 2 (Courses) | | | | | | |
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |

A. 2. Effectiveness and Support for Remedial Classes

| Courses Handled so far | ACY | Pass Percentage | | Remedial Classes (Status) |
|------------------------|-----|-----------------|------------|-------------------------------------|
| | | First attempt | At present | |
| 1. | | | | Handling / Completed / Not Required |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |

¹ Please provide the number of failures (One subject failures only) in that semester under this course

| | | | | |
|----|--|--|--|--|
| 7. | | | | |
|----|--|--|--|--|

A. 3. Static E-Content Development for the Courses during the Present Appraisal Duration

| Semester 1 (Courses) | HoD's Remark | Semester 2 (Courses) | HoD's Remark |
|----------------------|--------------|----------------------|--------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |

Part B (Contribution to the Department Development)

| Additional Works Assigned by the HoD | HoD's Remark | Additional Works Volunteered | HoD's Remark |
|--------------------------------------|--------------------------|------------------------------|--------------------------|
| 1. | Satisfied/ Not Satisfied | 1. | Satisfied/ Not Satisfied |
| 2. | Satisfied/ Not Satisfied | 2. | Satisfied/ Not Satisfied |
| 3. | Satisfied/ Not Satisfied | 3. | Satisfied/ Not Satisfied |
| 4. | Satisfied/ Not Satisfied | 4. | Satisfied/ Not Satisfied |
| 5. | Satisfied/ Not Satisfied | 5. | Satisfied/ Not Satisfied |

Eg. Class teacher, timetable coordinator, mentor, NBA coordinator, NAAC coordinator, placement coordinator, autonomous coordinator, department newsletter, students training and other similar portfolio (s).

Part C.1 (Professional Development Activities)

| | | |
|---|---|-------|
| No. of STTP / FDP participated by Institutes (Outside) sponsored by statutory bodies only (AICTE, ATAL, NITTR, and other similar agencies) (3-days and above only) (Online / Offline) | : | |
| No. of Online Certification Courses (Undergone) | : | |
| No. of proposals submitted for organizing FDPs / STTP to funding agencies | : | |
| No. of proposals sanctioned by funding agencies for organizing FDPs / STTPs | : | |
| No. of FDPs / STTP organized (Funded) / Self supported | : | X Y |
| No. of workshops attended / organized | : | X Y |
| Please attach a list of the above details and other details shall be uploaded to the google form as suggested by the documentation cell | | |

Part C.2 (Research and Consultancy)

| | | | | | |
|---|---|--|-----------------------------------|---|--|
| Total No. of papers published in Journals | : | | No. of Indexed (Scopus/SCI) | : | |
| Papers presented (Within India) | : | | Intl. / National | : | |
| Papers presented outside India | : | | Patents | : | |
| Copyright | : | | Revenue through consultancy (Rs.) | : | |

| Books | : | | Book Chapter (s) | : | |
|--|---------|--------------|------------------|--------|------------|
| Have you submitted all the above proofs if any to Documentation Cell / Dept. | | | | | : Yes No |
| Research Projects (Funded) | | | | | |
| No. | Project | Amount (Rs.) | Agency | Status | |
| 1 | | | | | |
| 2 | | | | | |

Additional Information:

Signature :

Recommended | Not Recommended

Date :

Head of the Department

Approved | Not Approved

Head of the Institution