

**CONFIDENTIAL REPORT**  
**FOR**

**SIKKIM STATE**  
**CIVIL SERVICE OFFICERS**  
(PERFORMANCE APPRAISAL REPORT)

Name of the Officer : \_\_\_\_\_

Report for the Year : \_\_\_\_\_

Period from : \_\_\_\_\_

**CONFIDENTIAL REPORT FOR  
SIKKIM STATE CIVIL SERVICE OFFICERS**

DEPARTMENT / OFFICE OF : \_\_\_\_\_

Report for the year: \_\_\_\_\_

Period from : \_\_\_\_\_ to \_\_\_\_\_

**PART-I  
(TO BE FILLED BY OFFICE)**

1. Name of Officer & Designation:
2. Date of Birth:
3. Date of appointment of Gazetted Grade:
4. Date of continuation appointment to the Sikkim State Civil Service:
5. Date of appointment to the present post
6. Period of absence on leave during the Reporting year/ period:
7. Training received during the Reporting year / period indicating the course attended, duration of course & the institution where attended:

**PART-II**  
**(TO BE FILLED BY THE OFFICER REPORTED UPON)**

1. A brief summary of duties and responsibilities (in not more than 50 words).

DEPARTMENT: \_\_\_\_\_  
Report for the year: \_\_\_\_\_  
Period from: \_\_\_\_\_ to: \_\_\_\_\_

2. Please specify important items of work in order of priority where in quantitative physical / financial target / objectives / goals were set for you or set by yourself for the reporting year.

Tasks to be performed	Achievements
1.	
2.	
3.	
4.	
5.	

3. Please specify the number of inspections conducted / tours performed (Only in case of field Officers).

No. of inspections / tours expected to be performed in a year	No. of inspections / tours actually performed with reasons for shortfall, if any

4. Please indicate instances, if any delinquency among your subordinates and action taken in such cases.



**PLACE:**

**SIGNATURE:**

**DATE:**

**NAME:**

**DESIGNATION:**



**PART - III**  
**( TO BE FILLED IN BY REPORTING OFFICER)**

1. Assessment of WORK OUTPUT with reference to part II of the report. Grades should be assigned on a scale of 1-10 in whole numbers with 1 referring to the lowest grade and 10 to the best grade).

		Reporting Authority
i.	Accomplishment of Planned Work	
ii.	Quality of Output	
iii.	Accomplishment of exceptional work/unforeseen tasks performed	
	Overall Grading on 'Work Output'	

2. Assessment of PERSONAL ATTRIBUTES (on a scale of 1-10)

		Reporting Authority
i.	Attitude to work	
ii	Sense of responsibility	
iii.	Overall bearing and personality	
iv.	Emotional stability	
v.	Communication skills	
vi.	Relationship with colleagues and public	
vii.	Leadership qualities	
viii.	Suitability for promotion to higher post/ responsibility	
	Overall Grading on Personal Attributes	

3. Assessment of FUNCIONAL COMPETENCY (on a scale of 1-10)

		Reporting Authority
i.	Knowledge of laws/rules/Procedures/ IT skills and awareness of the local norms in the relevant area	
ii.	Control and Management of subordinates	
iii.	Decision making ability	
iv.	Initiative	
v.	Coordination ability	
vi.	Ability to motivate and work in a team	
	Overall Grading on functional competency	

#### 4. APTITUDE AND POTENTIAL

Please indicate three fields of work from amongst the following for possible specialization and career development of the Officer. Please mark as 1.2.3 in three appropriate boxes.

1. Personnel Administration \_\_\_\_\_

2. Law and order and internal security \_\_\_\_\_

3. Financial Administration \_\_\_\_\_

4. Agriculture & Rural Development \_\_\_\_\_

5. Social Service & Educational Administration \_\_\_\_\_

6. Planning \_\_\_\_\_

7. Forest and Environment \_\_\_\_\_

8. Industry and Trade \_\_\_\_\_

9. Any other field (Please Specify) \_\_\_\_\_

5. Please comment on the Officer's integrity.

6. Overall grading

*(Please put a ring round the appropriate grading & strike out other gradings).*

Outstanding

Very Good

Good

Average

Below Average

**NOTE:** *An Officer should not be graded outstanding unless exceptional qualities and performance have been noticed, grounds for giving such a gradings should be clearly brought out*

Place:

Signature of the Reporting Officer

Date:

Name in block letters:

Designation:

(During the period of Report)

**PART IV**  
**(Remarks of the Reviewing Officer)**

1. Do you agree with the assessment of the Officer given by the Reporting Officer? If not, indicate the items/ aspects on which you disagree and give your own assessment on those aspects/ items.

2. Overall Assessment of Performance and Qualities

Place:

Signature of the Reviewing Officer

Date:

Name in block letters:

Designation:

(During the period of Report)



**PART - V**  
**(Remarks of the Accepting Authority)**  
**(Authority next to the Reviewing Authority)**

1. Do you agree with the remarks of the Reporting/ Reviewing Authority?

YES/ NO.

(In case of difference of opinion, details and reasons for the same may be given)

2. Overall Assessment of Performance and Qualities.

Place: \_\_\_\_\_ Signature of the Accepting Authority

Date: \_\_\_\_\_ Name in block letters:

Designation:  
(During the period of Report)