



जम्मू केंद्रीय विश्वविद्यालय  
Central University of Jammu

राया-सूचानी (बागला), जिला सांबा-181143, जम्मू (जम्मू एवं कश्मीर)  
Rahya-Suchani (Bagla), District: Samba - 181143, Jammu (J&K)

**ANNUAL PERFORMANCE APPRAISAL REPORT (APAR)**

Name : .....

Designation : .....

Employee I.D. No. : .....

Date of Birth : .....(DD/MM/YYYY)

Department : .....

Year : ..... to .....

*Note: Deans/ Head of the Department shall submit duly completed APAR to the Registrar latest by 31<sup>st</sup> July.*

Due Date : .....

Date of submission : .....

Date (Signature of Dean)

**Note I:-**

1. The Reporting Authority of faculty member shall be the Head of the Department.
2. The Reviewing Authority of the faculty member shall be the Dean of the School.
3. Approving Authority of the Faculty members shall be Vice Chancellor.
4. Dean shall be the Reporting Authority of the Head of the Department. Vice Chancellor shall be the Reviewing and Approving Authority of the Head.
5. The Vice Chancellor shall be Reporting, Reviewing and Approving Authority of the Deans (Single Tier Report).

**Note II:-**

1. In case of an adverse remark, the adverse entry shall be communicated to the concerned member of Faculty who may if he/she so desires within 30 days of the date communication, represent to the Vice Chancellor for Redressal of his/her case supported by the evidence to sustain his/her claim.
2. Kindly attach additional page/documents wherever required.



**13. Teaching, Learning and Evaluation Activities:**

Lectures/Tutorials/Practical's/Projects/Seminars Conducted:

**( A ) ODD SEMESTER ( JULY TO DECEMBER )**

S. No.	Course Code	Course Title	Contact Hours/ Week	Total No. of Classes in Semester		Percentage of the course*	Self Assessment**
				Assigned	Taught		
Total:							

\*Percentage = (Classes Taught / Classes Assigned) x 100

\*\*80% & above **Good** or Between 80% & 70% **Satisfactory** or Less than 70% **Not satisfactory**

**Remarks by the HoD :**

**( B ) EVEN SEMESTER ( JANUARY TO JUNE )**

S. No.	Course Code	Course Title	Contact Hours/ Week	Total No. of Classes in Semester		Percentage of the course*	Self Assessment**
				Assigned	Taught		
Total:							

\*Percentage = (Classes Taught / Classes Assigned) x 100

\*\*80% & above **Good** or Between 80% & 70% **Satisfactory** or Less than 70% **Not satisfactory**

**Remarks by the HoD:**

**14. Involvement in the University students related activities/research activities:**

*(Good - Involved in at least 3 activities Satisfactory - 1-2 activities Not-satisfactory - Not involved / undertaken any of the activities.*

*Note: Number of activities can be within or across the broad categories of activities)*

**(a) Administrative responsibilities such as Head, Chairperson/ Dean/ Director/ Co-ordinator, Warden etc**

S No	Administrative responsibilities	Dates/Duration	Year
i)			
ii)			
iii)			
iv)			
<b>Self Assessment:</b>			
<b>Remarks by the HoD:</b>			

**(b) Examination and evaluation duties assigned by the University or attending the examination paper evaluation.**

S. No.	Activity	Class	Mid Sem.	End Sem.
i)	No. of Q. Papers Set (Details paper wise)	UG		
		PG		
ii)	No. of Answer Sheets Evaluated (paper wise)	UG		
		PG		
iii)	Returning & Discussing Answers in Class	UG		
		PG		
iv)	No. of Students Examined through Practical/ Seminar/ Project Examination	UG		
		PG		
v)	No. of Examination Invigilation Duties	Allotted		
		Performed		
<b>Self Assessment:</b>				
<b>Remarks by the HoD:</b>				

- (c) **Student related co-curricular, extension and field based activities such as student clubs, career counselling, study visits, student seminars and other events, cultural, sports, NCC, NSS and community services and any other.**

<b>S No</b>	<b>Name of the activity</b>	<b>Dates/ Duration</b>	<b>Convener/Coordinator/Member</b>
i)			
ii)			
iii)			
iv)			
<b>Self Assessment:</b>			
<b>Remarks by HoD:</b>			

- (d) **Organising seminars/conferences/workshops, other University activities.**

<b>S. No.</b>	<b>Title</b>	<b>Dates/ Duration</b>	<b>Sponsoring Agency, Organisation &amp; Place held</b>	<b>Attended/ Organized</b>
i)				
ii)				
iii)				
iv)				
v)				
vi)				
<b>Self assessment:</b>				
<b>Remarks by HOD:</b>				

**(e) Evidence of actively involved in guiding Ph.D students**

S. No.	Enrol. No. & Name of the Student	Title of Thesis/ Dissertation	Names of Joint Supervisors	Course (PG/M.Phil/ Ph.D.)	Status (Completed/ Ongoing )	Due date of completion (If ongoing)
i)						
ii)						
iii)						
iv)						
v)						
<b>Self Assessment:</b>						
<b>Remarks by the HoD:</b>						

**(f) Conducting minor or major research project sponsored by national or international agencies**

S. No.	Title of Research Project/ Consultancy Work/ Patent/ undertaken this year	Type	Details of Sponsoring Agency	Duration, Sanction Date & Status	Amount Sanctioned	Chief or Co Investigator (Specify)	Status (ongoing/ completed)
i)							
ii)							
iii)							
<b>Self Assessment:</b>							
<b>Remarks by HoD:</b>							

**(g) Publication in peer reviewed or UGC list of Journals**

Name of the Author(S) (Main Author then co-author)	Title of the Article/Research paper/ Book Chapter/ Any Other	Vol. No.	Name of Publisher	Name of the Magazine/Journal/ Book	ISSN/ISB N. No	Year of Publication
<b>Self Assessment:</b>						
<b>Remarks by HoD:</b>						

**(h) Consultancy/Patents**

S.No.	Agency	Amount	Type/duration	Any other
Consultancy				
Patents				
<b>Self Assessment:</b>				
<b>Remarks by HoD:</b>				

**15. Academic activities:**

- (a) Creation of ICT mediated Teaching Learning pedagogy and content and development of new and innovative courses and curricula

S No	Activity	Explanation of Activities	Remarks by HoD
(a)	Development of Innovative pedagogy (Give details)		
(b)	Design of new curricula and courses (Give details)		
(c)	Development of complete MOOCs in 4 quadrants		
(d)	MOOCs per module/lecture		
(e)	Content writer/subject matter expert for each module		
(f)	Course Coordinator for MOOCs (attached evidence)		
(g)	Development of e-Content for complete course (Give details)		
(h)	Editor of e-content for complete course/ paper/ e-book		
(i)	*Policy Document (Submitted to an International body/ organisation like UNO/ UNESCO/ World Bank/ International Monetary Fund etc. or Central Government or State Government)		

**16. Attending Orientation/Refresher/Methodology courses**

S No	Type of course/programme	Duration	Date(s)	Name of the Organizer
i)				
ii)				
iii)				
iv)				
<b>Remarks by HoD:</b>				

**17. Invited Lectures**

S No	Title of the Invited Lecture	Date(s)	Name of the Organizer
i)			
ii)			
iii)			
iv)			
<b>Remarks by HoD:</b>			

**18. Fellowships:**

S No	Type of Fellowship	International/ National	Date(s)	Amount	Name of the Agency
i)					
ii)					
iii)					
iv)					
<b>Remarks by HoD:</b>					

**19. Resource Person**

S No	Name of the Event	Date(s)	Name of the Organizer
i)			
ii)			
iii)			
iv)			
<b>Remarks by HoD:</b>			



**20. Paper presentation in Seminars/ Conferences/full paper in Conference Proceedings (Paper presented in Seminars/Conferences and also published as full paper in Conference)**

S. No.	Names of All Authors in Order as in Publication	Title Conference Proceedings	Date of Presentation	Type of Conference (National/International)
i)				
ii)				
iii)				
<b>Self Assessment:</b>				
<b>Remarks by HoD:</b>				

**21. Any Other Information:**

**22. List of Enclosures:**

*Certified that the above data is correct and I shall be responsible for any inaccurate/incorrect data and shall be liable for suitable action for the same, as decided by the authorities.*

**Signature of Faculty**

**Date**

**PART – II**

**ASSESSMENT OF THE REPORTING AUTHORITY (HEAD OF THE DEPARTMENT)**

**GENERAL**

- 1. Relations with the students, scholars and staff**  
(Please comment on the Faculty accessibility to the above and responsiveness to their needs)
  
- 2. Training**  
(Please give recommendations for training with a view to further improving the effectiveness and capabilities of the faculty)
  
- 3. State of Health**
  
- 4. Integrity** (Please comment on the integrity of the faculty)
  
- 5. Overall remarks by the Head of the Department** (Reporting Authority) on overall qualities of the faculty including area of strengths and lesser strength, extraordinary achievements, significant failures and attitude towards weaker sections.
  
- 6. Overall grading by the HoD** (Good/ Satisfactory/ Not-satisfactory)

**Signature of the Head of the Department  
(Reporting Authority)**

**Name in Block Letters:.....**

**Place:.....**

**Designation:.....**

**Date:.....**

**During the period of Report:.....**



**PART – IV**

**APPROVING AUTHORITY (VICE CHANCELLOR)**

1. **Pen Picture about the faculty**

2. **Overall performance during the period of Reporting (Good/ Satisfactory/ Not-satisfactory):**

3. **Recommendations/observation:**

**Signature of the Vice Chancellor**  
(Approving Authority)

**Place:.....**

**Date:.....**