



POWER TRANSMISSION CORPORATION OF UTTARAKHAND LTD.

PERFORMANCE APPRAISAL REPORT

(Finance)

ASSISTANT ACCOUNT OFFICER TO GENERAL MANAGER

पॉवर ट्रॉसमिशन कारपोरेशन ऑफ उत्तराखण्ड लि०
(उत्तराखण्ड सरकार का उपक्रम)

POWER TRANSMISSION CORPORATION OF UTTARAKHAND LTD.

(A Government of Uttarakhand Enterprise)

कारपोरेशन मुख्यालय:- विद्युत भवन, नजदीक-आई०एस०बी०टी० क्रॉसिंग, सहारनपुर रोड, माजरा, देहरादून
Vidyut Bhawan, Near ISBT Crossing, Saharanpur Road, Majra, Dehradun

POWER TRANSMISSION CORPORATION OF UTTARAKHAND LTD.

PERFORMANCE APPRAISAL REPORT
(Assistant Account Officer to General Manager (F))

For the Year/Period - From to

Each and every section of this form should be filled in by the concerned officer

Section I - Basic information

Personal Data of the officer reported upon

<p>1. Name of the Officer reported upon: _____</p> <p>2. Employee Number: _____</p> <p>3. Date of Birth: _____</p> <p>4. Brief Academic & Professional Qualifications : _____</p> <p>5. (a) Name of the Post held: _____</p> <p>(b) Grade of Post held: _____</p> <p>(c) Date of Continuous Appointment in this Post: _____</p> <p>(d) Present Pay and Scale of Pay: _____</p> <p>(e) Date of continuous Appointment in the same enterprise: _____</p> <p>6. (a) Date of First Public Enterprise Appointment: _____</p> <p>(b) Scale of Pay of the Post on First Appointment: _____</p>

7. Reporting, Reviewing and Accepting Authorities during the year

	Name & Designation	Period worked	
		from	to
Reporting Authority			
Reviewing Authority			
Accepting Authority			

8. Period of absence on leave, etc. during the year

	Period	Type	Remarks
On Leave other than Casual Leave			
Others (specify)			

9. Qualification acquired and Training programmes attended during the year:**(a) Details of Qualification acquired during the year**

S. No.	Details of Qualification	Institution from which studied	Details of subjects studied and the marks obtained

(b) Details of Training programme attended during the year

From	To	Institute	Subject

10. Awards/Honours received during the year

11. Date of filing the property return in the prescribed format for the year ending 31st December, _____.

**Signature:
Name & Designation of the concerting officer**

Date:

SECTION II – SELF-APPRAISAL OF THE OFFICER REPORTED UPON

- 1. Brief description of responsibilities:**
(Objectives of the position you hold and the responsibilities you are required to discharge, in about 100 words)

2. During the period under report, do you believe that you have made any exceptional contribution, e.g. successful completion of an extraordinarily challenging task or major systemic improvement (resulting in significant benefits to the Company and/or education in time and costs)? If so, please give a verbal description (within 100 words):

3. What are the constraints that hindered your performance?

4. Please indicate specific areas of training that will add value to you:

For the current assignment:
For your future career:

5. Declaration

Have you filed your immovable property return in the prescribed format as due? If yes, please mention the date.	Yes/No	
Have you set the annual work plan for all officers for the current year, in respect of whom you are the Reporting Authority?	Yes/No	

Date:

Signature of the officer reported upon

SECTION III - APPRAISAL OF THE REPORTING AUTHORITY

(Please read the relevant instructions attached to this form before filling up this section)

- 1. **Please state whether you agree with the responses relating to the accomplishments of the work plan as filled out in Section II. If not, please furnish factual details.**

- 2. **Please comment on the claim (if any) made by the officer reported upon about his exceptional contribution.**

3. Has the officer reported upon met with any significant shortfall in achieving the targets? If yes, please furnish factual details.

4. Do you agree with the constraints mentioned by the officer reported upon that had hindered his performance and, if so, to what extent?

5. Do you agree with the competency up-gradation needs as identified by the officer?

Table-A (Marks-70)**6. Review of Annual Work Plan for the Financial Year.....**

<i>Place of posting : Corporate Finance (Establishment & Pension Wing)</i>					<i>Reporting</i>
<i>Officer</i>					
S.No.	Description of Annual Planned Tasks / KRAs	Target		Planned**	Weightage / Marks
		Unit	Working Days	Days of Completion	
1	Verification & Checking of Pension Cases	Days/Per Case	30	30	5
2	Re-submission to concerned Units for its rectification, if any	Days/Per Case	2	2	2
3	On line Feeding in the pension module of treasury after receipt of rectification from the concerned Unit in case of employees below the level JE's/Supervisory Posts (If treasury web site works properly)	Days/Per Case	5	5	5
4	On line Feeding in the pension module of treasury after receipt of rectification from the concerned Unit/administrative approval from HR in case of employees above the level JE's/Supervisory Posts (If treasury web site works properly)	Days/Per Case	5	5	5
5	Checking of Medical Bills and submission for rectification of Medical Bills to concerned Unit for amount exceeding Rs. 50,000/-	Days/Per Case	5	5	4
6	After receipt of rectified Medical Bills for amount exceeding Rs. 50,000/- and submission to HR Department (if there is no objection)	Days/Per Case	3	3	4
7	Checking of Medical Bills pertaining to Hospitals against Cashless Treatment	Days/Per Case	5	5	5
8	Issue of Pay Authorities to officers on Promotion and ACP's after receipt of order and charge Certificate and service book	Days/Per Case	1	1	5

9	Issue of Pay Authorities to officers on annual increments		by 23rd January and 23rd July of every Year	by 23rd January and 23rd July of every Year	3
10	Vetting of pay fixation and arrear bills of employees after receipt of the case	Days/Per Case	7	7	2
11	Issue of Leave Card of Officers after receipt of requests	Days/Per Case	2	2	2
12	Sanctioning of Earned Leave, Medical Leave, Medical Reimbursement, Childcare Leave, Paternity Leave, Encashment of Earned Leave of Accounts Staff	Days for Monthly Cases	2	2	2
13	Checking of fund Requisition of salaries, Final Leave Encashment received from Units and submission of Fund Requisition for transfer of salaries to Corporate Funds Department	Monthly	by 30th/31st/1st/2nd of the every Month	by 30th/31st/1st/2nd of the every Month	2
14	Transfer of Funds to Units after receipt of funds from the Corporate Fund Department	Monthly	within one day after receipt of fund	within one day after receipt of fund	2
15	Submission of Fund Requirement for GPF to Corporate Funds Department after freezing of Salary	Monthly	by 5 th of the every Month	by 5 th of the every Month	2
16	Transfer of Funds to UPCL GPF Trust after receipt of funds from the Corporate Funds Department	Monthly	by 7 th of the every Month	by 7 th of the every Month	2
17	Submission of Fund Requirement for EPF to Corporate Funds Department after freezing of Salary	Monthly	by 10 th of the every Month	by 10 th of the every Month	2
18	Transfer of Fund to EPFO through RTGS after receipt of funds from the Corporate Funds Department	Monthly	by 15 th of the every Month	by 15 th of the every Month	2
19	Allotment of EPF No. of new employees	Monthly	<i>within 15 days of receipt of all documents</i>	<i>within 15 days of receipt of all documents</i>	2
20	Submission of Fund Requirement for Pension & Gratuity to Corporate Funds Department after freezing of Salary	Monthly	by 15 th of the every Month	by 15 th of the every Month	2

21	Transfer of Funds to GOU after receipt of funds from the Corporate Funds Department	Monthly	by 20 th of the every Month	by 20 th of the every Month	2
22	Submission of Funds requirement for GSLI to Corporate Funds Department after freezing of salary	Monthly	by 22 nd of every Month	by 22 nd of every Month	2
23	Transfer of Funds to LIC after receipt of funds from the corporate Funds Department	Monthly	by 25 th of the every Month	by 25 th of the every Month	2
24	Revision of GSLI Premium of Staff		by 25th June of every Year	by 25th June of every Year	2
25	Preparation and submission of Monthly Accounts to Corporate (F&A) Department	Monthly	by 10th of every Month	by 10th of every Month	2
	Total				70

Power Transmission Corporation of Uttarakhand Ltd.,Dehradun**Annual Work Plan for the Financial Year.....****(*** In case of Mid term review,effective date.....)**

Name of the officer :

Designation : Senior Accounts

Officer

Place of posting : Corporate Finance (Establishment & Pension Wing)

Reporting Officer.....

S.No.	Description of Annual Planned Tasks / KRAs	Target			Weight age / Marks
		Unit	Working Days	Days of Completion	
1	Checking of Medical Bills and submission for rectification of Medical Bills to concerned Unit for amount exceeding Rs. 50,000/-	Days/Per Case	5	5	5
2	After receipt of rectified Medical Bills for amount exceeding Rs. 50,000/- and submission to HR Department (if there is no objection)	Days/Per Case	3	3	5
3	Checking of Medical Bills pertaining to Hospitals against Cashless Treatment	Days/Per Case	5	5	5
4	Issue of Pay Authorities to officers on Promotion and ACP's after receipt of order and charge Certificate and service book	Days/Per Case	1	1	10
5	Issue of Pay Authorities to officers on annual increments		by 23rd January and 23rd July of every Year	by 23rd January and 23rd July of every Year	10
6	Vetting of pay fixation and arrear bills of employees after receipt of the case	Days/Per Case	7	7	5
7	Issue of Leave Card of Officers after receipt of requests	Days/Per Case	2	2	2
8	Sanctioning of Earned Leave, Medical Leave, Medical Reimbursement,Childcare Leave, Paternity Leave, Encashment of Earned Leave of Accounts Staff	Days for Monthly Cases	2	2	2
9	Checking of fund Requisition of salaries, Final Leave Encashment received from Units and submission of Fund Requisition for transfer of salaries to Corporate Funds Department	Monthly	by 30th/31st/ 1st/2nd of the every Month	by 30th/31st/ 1st/2nd of the every Month	2
10	Transfer of Funds to Units after receipt of funds from the Corporate Fund Department	Monthly	within one day after receipt of fund	within one day after receipt of fund	2

11	Submission of Fund Requirement for GPF to Corporate Funds Department after freezing of Salary	Monthly	by 5 th of the following Month	by 5 th of the following Month	2
12	Transfer of Funds to UPCL GPF Trust after receipt of funds from the Corporate Funds Department	Monthly	by 7 th of the following Month	by 7 th of the following Month	2
13	Submission of Fund Requirement for EPF to Corporate Funds Department after freezing of Salary	Monthly	by 10 th of the following Month	by 10 th of the following Month	2
14	Transfer of Fund to EPFO through RTGS after receipt of funds from the Corporate Funds Department	Monthly	by 15 th of the every Month	by 15 th of the every Month	2
15	Allotment of EPF No. of new employees	Monthly	<i>within 15 days of receipt of all documents</i>	<i>within 15 days of receipt of all documents</i>	2
16	Submission of Fund Requirement for Pension & Gratuity to Corporate Funds Department after freezing of Salary	Monthly	by 17 th of the following Month	by 17 th of the following Month	2
17	Transfer of Funds to GOU after receipt of funds from the Corporate Funds Department	Monthly	by 20 th of the following Month	by 20 th of the following Month	2
18	Submission of Funds requirement for GSLI to Corporate Funds Department after freezing of salary	Monthly	by 22 nd of the following Month	by 22 nd of the following Month	2
19	Transfer of Funds to LIC after receipt of funds from the corporate Funds Department	Monthly	by 25 th of the following Month	by 25 th of the following Month	2
20	Revision of GSLI Premium of Staff		by 25th June of every Year	by 25th June of every Year	2
21	Preparation and submission of Monthly Accounts to Corporate (F&A) Department	Monthly	by 10th of the every Month	by 10th of the every Month	2

7. **Integrity** (Please comment on the integrity of the officer reported upon by choosing any one of the following options):

i)	Beyond doubt	
ii)	Integrity of the officer is doubtful. A separate secret note is attached.	
iii)	Nothing adverse has been received about the officer	

8. **Pen picture by Reporting Officer.** Please comment (in about 100 words) on the overall qualities of the officer including areas of strengths and those which need improvements.

9. **Overall grade (Bad, Good, Very Good, Outstanding)**

**Signature of Reporting Officer
Name & Designation of the Reporting Officer**

Date:

SECTION IV – REVIEW BY THE REVIEWING AUTHORITY

(Please read the relevant instructions attached to this form before filling up this section)

- 1. **Do you agree with the assessment made by the Reporting officer with respect to discharge of responsibilities and various attributes of the officer reported upon?** (In case you agree with the assessments made by the Reporting Authority, please make a note to that effect. If you do not agree with the assessments made by the Reporting Authority, please record your assessments in the space provided for you).

Yes/No

- 2. **Do you agree with the assessment of the Reporting officer in respect of extraordinary achievements and/or significant shortfalls of the officer reported upon?**

Yes / No

- 3. **In case of difference of opinion, details and reasons for the same may be given.**

- 4. **Comments, if any, on the pen picture written by the Reporting Authority.**

- 5. **Overall grade (Bad, Good, Very Good, Outstanding)**

**Signature of Reviewing Authority
Name & Designation of the Reviewing Authority**

Date:

SECTION V – ACCEPTANCE BY THE ACCEPTING AUTHORITY
(Please read the relevant instructions attached to this form before filling up this section)

1. Is the overall grade given by the Reporting/Reviewing Authority is consistent with the pen picture given by them?

Yes/No

2. Do you agree with the remarks of the Reporting /Reviewing Authorities?

Yes/No

3. In case of difference of opinion, details thereof and reasons for the same may be given.

4. Overall grade (Bad, Good, Very Good, Outstanding)

Signature of Accepting Authority
Name & Designation of the Accepting Authority

Date: