



पावर ट्रांसमिशन कारपोरेशन ऑफ उत्तराखण्ड लि०

(उत्तराखण्ड सरकार का उपक्रम)

मानव संसाधन एवं प्रशासनिक विभाग

विद्युत भवन, नजदीक-आई०एस०बी०टी० क्रासिंग, सहारनपुर रोड़, माजरा, देहरादून-248002

दूरभाष नं० 0135-2645249 फैक्स नं० 0135-2645249 email:- hr@ptcul.org

पत्रांक: 1575/मा०सं०एवंप्र०वि०/पिटकुल/ईओ-13

दिनांक : 18.08.2018

विषय: KPI के प्रारूप के सम्बन्ध में।

समस्त मुख्य अभियन्ता/महाप्रबन्धक,

पिटकुल.....।

निदेशक मण्डल द्वारा दिये गये निर्देशों के अनुपालन में कार्यालय परिपत्र सं० 1435/मा०सं०एवंप्र०वि०/पिटकुल/ईओ-13 दिनांक 23.07.2018 के माध्यम से अधिकारी वर्ग की KPI निर्धारण करने के सम्बन्ध में आवश्यक दिशा-निर्देश जारी किये गये हैं।

निदेशक मण्डल की दिनांक 26.02.2018 को सम्पन्न 62वीं बैठक में निदेशक मण्डल द्वारा ए०सी०आर० के प्रारूप के सम्बन्ध में निम्नवत् अनुमोदन प्रदान किया गया:-

"The ACR format for the employees should be reviewed by Director HR. This should be in line with the formats adopted in other corporations."

इसी क्रम में निदेशक मण्डल की दिनांक 21.05.2018 को सम्पन्न 63वीं बैठक में निदेशक मण्डल द्वारा नवीन ए०सी०आर० प्रारूप हेतु निम्नवत् निर्देशित किया गया :-

"For the ACR formats of the corporation, PGCIL format can be considered template. Performance evaluation of management and employees shall be based on the KPI's"

निदेशक मण्डल द्वारा प्रदत्त निर्देशों के अनुपालन में पी०जी०सी०आई०एल० एवं अन्य विभागों में प्रचलित वार्षिक गोपनीय आख्याओं के प्रारूपों का अध्ययन एवं विश्लेषण तथा प्रबन्ध निदेशक महोदय के अनुमोदनोपरान्त पिटकुल के अधिकारियों हेतु नवीन वार्षिक गोपनीय आख्या का प्रारूप निर्धारित किया गया जो इस पत्र के साथ संलग्न कर इस आशय से प्रेषित किया जा रहा है कि कृपया उक्त प्रारूपों में सम्बन्धित विभागों द्वारा उपलब्ध करायी गयी KPI के अनुसार प्रत्येक नियंत्रक अधिकारी अपने अधीनस्थ अधिकारियों का लक्ष्य प्रतिवर्ष निर्धारित करते हुए उक्त अधिकारी द्वारा सम्बन्धित वर्ष में प्राप्त लक्ष्य के अनुसार गोपनीय आख्याओं में अभिमत अंकित करेंगे। यदि इस सम्बन्ध में किसी संशोधन की आवश्यकता होती है तो उक्त संशोधन को भविष्य में सम्मिलित किये जाने पर विचार किया जा सकेगा।

कृपया उपरोक्त KPI प्रारूप को अपने नियंत्रणाधीन तैनात अधिकारियों को भी अवश्यमेव उपलब्ध करवाने का कष्ट करें।

संलग्नक: यथोपरि।

(आशीष कुमार)
निदेशक (मा०सं०)

पत्रांक: /मा०सं०एवंप्र०अनु०/पिटकुल/ईओ-13 तददिनांकित:

प्रतिलिपि निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित:-

1. निजी सहायक-प्रबन्ध निदेशक, पिटकुल को प्रबन्ध निदेशक महोदय के संज्ञानार्थ।
2. निदेशक (वित्त)/परिचालन/परियोजना, पिटकुल, देहरादून।
3. उपमहाप्रबन्धक (सू० एवं प्रौ०), पिटकुल, देहरादून को इस आशय से प्रेषित कि उपरोक्त पत्र कारपोरेशन की वेबसाइट पर प्रदर्शित करना सुनिश्चित करें।
4. सम्बन्धित पत्रावली/कट फाईल।

संलग्नक: यथोपरि।

(आशीष कुमार)
निदेशक (मा०सं०)



POWER TRANSMISSION CORPORATION OF UTTARAKHAND LTD.

PERFORMANCE APPRAISAL REPORT

(Information Technology)

ASSISTANT ENGINEER TO CHIEF ENGINEER

**पॉवर ट्रांसमिशन 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 Engineer to Chief Engineer)

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

EMP NO.....

10. Awards/Honours received during the year

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

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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.....

S. No.	Performance Indicator	Weightage Marks	Target Planned	Target Achieved	Maximum Allotted Marks	Marks by Reporting Officer	Marks by Reviewing officer	Marks by Accepting Authority
1	Maintenance of Data Centre	10						
2	Maintenance of IT Systems	10						
3	Maintenance of Software Applications	10						
4	Updating of website and e-mail solutions	10						
5	Timely purchase of IT equipments and softwares	10						
6	Handling of Government initiatives (Samadhan, E-tendering, Utakarsh etc.)	10						
7	Payment/billing promptness	5						
8	Trouble shooting attending efficiency	5						
	Total Marks	70						

Signatures along with Date & Stamp:-

Appraisee

Reporting Officer

Reviewing Officer

Accepting Authority

Assessment of General Attributes

Table-B (Marks-30)

Si. No.	Performance Indicator	Weightage Marks	Target Planned	Target Achieved	Maximum Allotted Marks	Marks by Reporting Officer	Marks by Reviewing officer	Marks by Accepting Authority
1	Office punctuality	4						
2	Behaviour and attitude	3						
3	Ownership and belongingness	3						
4	Training/knowledge upgradation	4						
5	Team building capabilities	3						
6	Co-ordination with others	3						
7	Awareness of rules & regulations	3						
8	Documentation	4						
9	Quality and commitment	3						
	Total Marks	30						

(*) Marks can be given upto two decimal.

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: