

SELF- APPRAISAL FORM FOR FACULTY



Name	
Designation	
Emp. ID	
School/Centre	
Date of last review	
Type of Review (For office use)	
Date of Review	

LAST YEAR DECLARED PLAN (FOR OFFICE USE ONLY)

	Tangible annual plan
Refereed Publications	
Courses taught	
Hiring PhD Scholars	
Projects (submission)	
Institute building	
Institute services	
Any other plan	

SUMMARY OF ACTIVITIES DURING THE YEAR:

1. Publication details (ONLY accepted in refereed Journals)
2. PhD scholars admitted and graduated (as a main supervisor or co-supervisor mention clearly)
3. Courses taught (type of course (core/elective etc, number of enrolled students etc.)
4. Sponsored research projects as (PI and Co-PI mention separately)

Details of Ongoing Projects	
Detail of Submitted Projects (During last year)	

5. Any leadership role in teaching/administration (such as initiating new degree program, organizing workshops, conferences, building an international network, visible sponsored projects such as building a research centre, teaching laboratories, Startup, etc.)
6. What do you consider to be your most important accomplishments in the last year?

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7. What challenges made it difficult to meet the performance outcomes?

FUTURE ONE-YEAR PLAN

	Tangible annual plan
Refereed Publications	
Courses	
Hiring PhD Scholars	
Projects (submission)	
Institute building	
Institute services	
Any other plan	

ATTACHMENTS

1. Please include complete CV.
2. Any Other supporting document (if any).

OTHER INFORMATION IF ANY

**COMMITTEE OBSERVATION /RECOMMENDATION DURING THE
REVIEW OF FACULTY**



Description	Rating				Remarks
	Excellent	Very Good	Good	Poor	
Teaching	Excellent	Very Good	Good	Poor	
Research Publications	Excellent	Very Good	Good	Poor	
Research Grants	Excellent	Very Good	Good	Poor	
Ph.D. Students	Excellent	Very Good	Good	Poor	
Patents	Excellent	Very Good	Good	Poor	
Institute services / Responsibilities	Excellent	Very Good	Good	Poor	

COMMITTEE RECOMMENDATION

His/her Probation is confirmed /Services Regularized/Placement in Level-11, 13A1 w.e.f. _____

Feedback/Advice if any:

Member

Member

Member

Member

**Director
IIT Mandi**