



# Atal Medical & Research University, H.P. (A State Govt. University)

(SLBS Govt. Medical College & Hospital Campus, Ner Chowk, Mandi, H.P.)  
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## Registrar's Office

### **FORM OF CONFIDENTIAL REPORT FOR THE POST OF Clerk/JOA (IT)/Jr. Asstt. Etc.**

(Column 1 to 6 to be filled from the individual concerned)

Reporting Year: \_\_\_\_\_

Branch/Department/Office : \_\_\_\_\_

1.	Name of Official	:	
2.	Date of Birth	:	
3.	Date of continuous appointment to the present grade vis.	:	
4.	Mode of Appointment	:	
5.	Section(s) in which served during the year under report and period of service in each	:	
6.	Period of absence from duty, if any	:	

### **A Brief Statement of the work handled by the official during the year/period under (To be filled by the Reporting Officer)**

7.	State of Health : Please indicate	:	
8.	General Intelligences and Keeness to learn	:	

**Note:**

**This assessment under column- 09 to 16 below should not be indicated by tick marks but should be clearly expressed in suitable words :**

9.	Proficiency in Typing/writing (Daily, Dispatch, Recording and Indexing, Degree Writing, Cash and Accounts Work):- a) Excellent b) Very Good c) Good d) Average e) Poor Proficiency should be assessed in respect of both speed.	:	
10.	Proficiency in his work viz, maintenance of prescribed register and charts etc :- a) Excellent b) Very Good c) Good d) Average e) Poor	:	
11.	Has the official ever been entrusted with work other than routine? If so, indicate his capacity to express himself with clarify and comprehension, in his notes and drafts.	:	
12.	Amenability to discipline.	:	
13.	Punctuality in attendance.	:	
14.	Relations with fellow employee.	:	
15.	Integrity	:	
16.	Has the official been reprimanded for indifferent work or for other causes during the period under report? If so, please give brief	:	

	particulars.		
17.	Has the official done any outstanding or notable work meriting commendation? Brief mention them.		
<b>GRADING : Outstanding/ Very Good/Good/Poor</b>			

**Signature of Reporting Officer  
With Designation and Stamp**

**Remarks of the Reviewing Officer :-**

18.	Length of service under the Reviewing Officer	:	
19.	Do you agree with the remarks of the Reporting Officer? If not, indicate the extent of your disagreement. If you want to add anything specific with regard to the work and conduct of the official over and above the remarks of the Reporting Officer, please mention them. You may also sum-up your views here.	:	
20.	Has the official any special characteristics and or any outstanding merits or abilities which would justify his advancement and special selection for higher appointment out or turn? If so, mention these characteristics briefly.	:	

**Signature of the Reviewing Officer  
With Designation and Stamp**

Counter Signature by the Next Higher Officer with remarks, If any.

Overall grading. (Outstanding/Very Good/Good/Poor)\_\_\_\_\_.

**Signature of the Accepting Authority  
Name.....  
Designation with stamp**