**CSIR FORM 3**

**COUNCIL FOR SCIENTIFIC & INDUSTRIAL RESEARCH\***

ANNUAL PERFORMANCE APPRAISAL FORM

**SENIOR MEMBERS – RESEARCH**

 **(PARTS I – IV TO BE COMPLETED BY OFFICER)**

**PART 1 BIODATA**

1. YEAR OF APPRAISAL…………………………………………………………………………………….
2. NAME OF OFFICER………………………………………………………………………………………..
3. PRESENT DESIGNATION………………………………………………………………………………….
4. DIVISION/INSTITUTE……………………………………………………………………………………….
5. RECORD OF SERVICE
6. DATE OF 1ST APPOINTMENT………………………………………………………………………..
7. DATE OF LAST PROMOTION………………………………………………………………………..
8. DATES OF STUDY LEAVE/SABBATICAL / LEAVE OF ABSENCE

…………………………………………………………………………………………………………….

1. DATE OF CURRENT CONTACT……………………………………………………………………..

**PART II JOB PERFORMED DURING YEAR UNDER REVIEW**

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**PART III ACTIVITIES / ACHIEVEMENTS DURING YEAR UNDER REVIEW**

|  |  |
| --- | --- |
| **RESULTS /IMPACT** | **NUMBER/DETAILS** |
| **Research Output/Journal/Conference Papers** |  |
| **Books** |  |
| **Technical Reports** |  |
| **Commercialization Activities/Technology****Transfer/Extension**  |  |
| **Designs released /Patents registered/ Varieties/ Breeds****Released/Prototypes produced** |  |
| **Administrative Experience/Contribution to** **Institute work** |  |
| **Honours/Awards received** |  |
| **Other Activities** |  |

**PART IV – APPROVED PROGRAMME OF WORK FOR FOLLOWING YEAR**

**……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….**

**Signature of Officer…………………………………………………………**

**Date:…………………………………………………………………………..**

**PART V – APPRAISAL BY DIRECTOR**

**Name of Candidate: …………………………………………………………………………………….**

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| --- | --- | --- | --- | --- | --- |
| **ASSESSMENT FACTORS****(IN RELATION TO NEXT****PROMOTION)** | **EXCELLENT** | **GOOD** | **AVERAGE** | **BELOW****AVERAGE** | **POOR** |
| **Quality of Research & Number of Publications** |  |  |  |  |  |
| **Contribution to** **Commercialization activities, Technology Transfer Extension service, etc.** |  |  |  |  |  |
| **Administrative experiences, committee work etc.** |  |  |  |  |  |
| **General contribution to the work of the Institute/Centre** |  |  |  |  |  |
| **Relationship with subordinates, superiors and peers, ability to work in a team, Leadership qualities etc** |  |  |  |  |  |
| **Overall Assessment** |  |  |  |  |  |

**GENERAL REMARKS BY DIRECTOR**

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**Director of Institute/Head of Centre Date**

**COMMENTS BY OFFICER ON DIRECTOR’S RECOMMENDATION**

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**Signature of Officer Date**

**PART VI - RECOMMENDATIONS AND COMMENTS BY DIRECTOR-GENERAL**

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**Director-General Date**