Government of andhra pradesh

OFFICE OF THE
COMMISSIONER OF TECHNICAL EDUCATION
ANDHRA PRADESH: VIJAYAWADA.

Cir. Memo. No. G1 /ACR 2017-18 /2018

Dated: 14-08 -2018

Sub: TECHNICAL EDUCATION – ESTABLISHMENT – APTES – Furnishing of Annual Property Statement and Annual Confidential Reports of Lecturers/ Senior Lecturers/ HOD/Principal working in the Government Polytechnic / Institutions – Certain information called for -Regarding.

Ref: G.O.Ms.No. 528 General Administration (Services) Dept., Dt. 19-08-2008

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The attention of all the Principals are invited to the subject cited and they are requested to furnish the Annual Property Statement (as per GO.Ms. 528 GAD (Ser) Dt. 19-08-2008) and Annual Confidential Reports of Administrative Officer /Lecturers / Senior Lectures / Head of Section / Principal working in their respective institution in the pro-forma appended to this memo for the current panel year i.e. 2017-18 on or before 18-08-2018 without fail. The same may be sent through a special messenger to this office within stipulated time.

This may be treated as most urgent.

Encl: a/a

 $\label{eq:Sd-V.S.DUTT} $$ for $PL.COMMISSIONER. $$$

To
All the Principals of Government Polytechnics./Institutions.
Copy to RJD (TE), Kakinada, Tirupati.
Copy to Stock file/Spare.

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SUPERINTENDENT W/8

ANNEXURE

FORM-A

PART-I

(TO BE FILLED BY THE OFFICER REPORTED UPON)

A brief summary of duties and responsibilities (not more than 50 words)

2. Please specify important items of work in order of priority where in quantitative / physical / financial targets / objectives / goals were set for you or set by yourself for the reporting year and achievements made.

Item of work	Physical or financial target/Objective/goal	Achievements
1.		
2.		
3.		
4.		
5.		
3(a)	In case of a short fall of expected quality/quantity of performance please state the reasons	

- (b) Please indicate your contribution in case of significantly higher achievement of the target / goal / objective.
- 4. Date of submission of Annual Property Returns.

SIGNATURE.

(ACR)

FORM-A Part-II

Annual Confidential Report on Gazetted Officers for the year _

1. Name of the Officer

Date of Birth

- 2. Appointment held during the year (with date) and pay and scale of pay.
- General qualifications and aptitude for post held including any special or technical and professional attainments.
- 4. (a) Acceptance or otherwise of the self appraisal report of the Gazetted Officer indicated in Part I and if not agreed to, the reasons therefor.
 - (b)Manner in which the Officer discharged his duties during the year i.e., if satisfactory or otherwise (specific instances of unsatisfactory work if adversely commended on to be cited with number and date of orders passed).
- 5. Does the Officer exhibit:
 - (a) Patience
 - (b) Tact
 - (c) Courtesy
 - (d) Impartiality in his relations with the public and subordinate or superior staff with whom he comes in contact:
- 6. Is the Officer:-
 - (i) Of good Character
 - (ii) Of sound constitution
- 7. Is the Officer:-
 - (i) Physically energetic
 - (ii) Mentally alert
- 8. How the Officer:
 - (i) Initiative and drive
 - (ii) Powers of Control
 - (iii) Powers of application
- Has the Officer any special characteristics and/ or any outstanding merits or abilities which would justify his advancement and special selection for higher appointments in the service.

Contd.,

10.	Is he confirmed in this post if not, what is his substantive post?	
10	(a) Date of submission of Annual Property Returns Statement pertaining to the year	
11.	Punishments, censures or special commendations in the period under report.	
12.	(a) Date of communication of adverse remarks since last report.	
	(b) Orders on the representation if any arising from (a) above.	
13.	General remarks (Comment generally on the way the Officer has carried out his duties, estimate of his personality etc.)	
14.	Grading:-	
	(i) Outstanding	
	(ii) Very good	
	(iii) Good	
	(iv) Satisfactory	
	(v) Poor	
	(Clearly indicate the reasons for grading of the Officers)	
15.	Reporting Officer	
	Date.	
		Signature
		Name and Designation (in block letter)
16.	Remarks of the Countersigning Officer	
	Date:	
		Signature
17	Oninion of the Head of the Department	Name and Designation (in block letters)
17.	Opinion of the Head of the Department (when not reporting Officer) on conduct and efficiency of Officer reported on.	
	Date:	Signature Name and Designation (in block letters) Head of the Department.