INDIAN RED CROSS SOCIETY

National Headquarters (Confidential Report)

For IRCS (NHQ) Officers

Re	eport for the Period 1st January 200		to 31st December 200
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	PAR	T- I	
1.	Name of the Officer (Full Name in Block letters)	÷,	
2.	Designation	:	
3.	Date of Birth	:	5
4.	Department	:	
5.	Date of Joining in IRCS	:	
6.	Date of Appointment to present position	:	-
7.	Date of Posting to Present Department/Section	:	
8.	Whether on probation/permanent/contractual	:	
9.	Present salary	:	
10.	Scale of Pay	:	
11.	Whether the officer belongs to SC/ST		

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Name of the Officer _____

From to _____

PART- II (SELF- APPRAISAL)

(To be filled by the officer Reported upon)

Brief description of duties: 1. . . 2. Training obtained during the period, if any 3. indicating paper or document prepared if any. Shortfalls if any in achievements may also be indicated specifying constraints. (If necessary, an extra page may be attached) (Resume not to exceed 300 words)

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Name of the Officer

From_____to ____

PART -III (ASSESSMENT OF THE OFFICER)

1. Does the Reporting Officer agree with all that is recorded under Part-II by the officer, if not, enumerate precisely the extent of disagreement and reasons thereof.

2. General comments on the quality of performance and application of knowledge.

 Comment clearly and in unambiguous terms on the following attributes of the Officer in relation to his performance.

a) General Intelligence and keenness to learn

b) Capacity for examining proposals/cases

c) Commitment to task assigned

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d) Devotion to duty

e) Human relation (his conduct with his colleagues, superiors and subordinates) and capacity to get work done

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f) Public relations

g) Intellectual honesty, creativity and Innovative qualities

h) Amenability to discipline,

i) Punctuality in attendance.

4. Aptitude for Administration

5. Has the Officer done any outstanding work meriting commendation? Briefly mention them.

6. Integrity: (In case of adverse remarks, please attach a separate note) :

7. Grading : Outstanding/ Very Good/Good/Average/Below Average

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(For grading outstanding, grounds for giving such a grading should be clearly brought out)

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Station:

Date:

(Signature of Reporting Officer)			
Na	me		
(in	Block Letters)		

Designation:

Name of the Officer _____

From ______to _____

PART- IV (REMARKS OF THE REVIEWING OFFICER)

1. Length of service under the reviewing officer

2. Does the reviewing officer fully agree with the remarks of the reporting officer recorded in part-III of the Performa? If he does not agree with any adverse remarks of the reporting officer, those remarks should be specifically mentioned for expunction or modification.

3. Is the officer reported upon specifically suited for particular job? If so, the nature of placement should be suggested.

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4. Grading:

Outstanding/Very Good/Good/Average.

Signature of Reviewing Officer

Name: _____ (In Block Letters)

Date : _____

Designation: ______(Stamp)

Service Details

1.	Full Name (In capital)
2.	Father's /Husband's Name:
3.	Date Of Birth:
4.	Place of Birth: Home/ Town (As recorded in Service book):
5.	Whether belongs to SC/ST (If so, exact caste or tribe to be specified)

6. A. Educational Qualification:

10+2 exam/Degree/ Examination Passed	University	Year	Division or distinction,
(a)	If any. (b)	(C)	(d)
-			

B. Details of qualification or other special qualifications (e.g., in science, commerce, accounts, etc.)

Examination Passed (a)	University or other recognized institution (b)	Year (c)	Division or distinction, obtained, if any (d)

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Name of the Officer:

7. Date of appointment with Order No. and date: _____

8. Brief Record of service:

Appointment held and	Department/office and place of Posting (b)	Period		No. & Date of
scale of pay (a)		From	To (c)	Order (d)
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9. Details of approved course of study/ training including refresher course undergone, if any:

Particulars of the course of study/ training (a)	Whether completed successfully or passed. (b)	Details of distinction obtained or special commendation received, if any. (c)

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I, Certify that the above information is correct to the best of my knowledge.

Station:

Signature of the officer

Date:

Name: _____

Designation: _____