

**MALWANCHAL UNIVERSITY INDORE**  
**INSTITUTUTE OF \_\_\_\_\_**  
**Annual/Interim Appraisal Report of Faculty**

The Annual Performance Appraisal Report of the Group 'A' faculty i.e. Professor/Associate Professor/Assistant Professor/Lecturer for the period from ----- - to -----.

**NOTE:- Please provide correct information and attach necessary Documents where ever needed to authenticate your statement.**

1. (i) Name of the faculty member:

(ii) Date of birth:

2. Qualification with name of University and month/year:

	Qualification	University	Month & year
a)			
b)			

3. (i) Present designation in full:

(ii) Date of appointment:

4. Whether the annual return on the Income Tax for preceding year was filled.

If not Then-

The date of filling the return should be given

## PART- I

### SELF APPRAISAL

#### **1. RESEARCH**

**A. Publications: First author or Second Author or Third Author or Fourth Author or Fifth Author.**

If the author placed lower in order/corresponding author feels that his contribution to the article was the most and he should get 100% marks- it should be certified by all the other authors; the order of all other authors for the purpose of counting marks will according slide downwards.

In a multicentric study, the single Index Medical College author irrespective of his rank in the publication will get benefit of first author; in case of multiple authors, the authors from Institute the author placed higher in order will get the benefit of first author (100% marks) while the next in order will get the benefit of second author, and so on.

Paper accepted in one year but published in another year or published in one year – faculty member could not get the marks in that year – the marks can only be claimed once (whichever year it is claimed)

**Answer in Yes/ NO**

#### **Indexed Journal – Based on Impact Factor of Journal**

Review Article/ original article  
Case Report/ Letter to Editor/ images/ CME  
Article in e/ online journal only  
Chapter in books/ Books

#### **Non Indexed National Specialty Journal**

Review/ Original Article  
Case Report/ Letter to Editor

#### **Non Indexed Regional Specialty Journal**

Review/ Original Article  
Case Report/ Letter to Editor

#### **Abstract published in supplemental issue/Proceedings**

**Details of Papers published during the year to be furnished by the Faculty (attach separate sheet if no space for number of publications)**

Short title	Nature of article (Review/ Book/ Chapter/ original etc.)	Abb. of Journal Vancouver style/ Publisher of Book	I. F	Authorship rank	Marks

**B. Papers/ Lectures in the Conferences (Marks will only be given to the presenter/Panelist/ Course Instructor)**

International/National (with award)  
 (Without award)  
 Regional (with award)  
 (Without award)

**C. Other Presentations(local lectures/ talks etc.)**

**International conference attendance:**

**Details of Conferences to be furnished by Faculty:**

Short title of paper	Short name of conference	Level (National/ International/ Regional)	Award (If any)	Marks

**D. Research Projects (only those cleared by Research and Ethics Committees of the institution)**

Principal Investigator of funded project  
 Co investigator of funded project  
 Principal Investigator of non-funded project  
 Co investigator of non-funded project  
 Supervisor of a thesis  
 Co-supervisor of a thesis

- **The role of investigator/ co-investigator, supervisor/co-supervisor of thesis must be clear and well specified.**
- **Research done by MBBS students with a designated faculty member as supervisor will not qualify for the marks.**
- **Marks will be given every year till the research project continues.**
- **For thesis, marks will only be given to the faculty member maximum of 2 candidates per year as supervisor and maximum of 2 candidates per year as co-supervisor.**
- **Marks for supervisor/co-supervisor of thesis will be given once only.**

Title of Project	Contribution (PI or CI, supervisor/cosuperviosr)	Name of the funding agency	Date of start and duration of project/thesis	Marks

## **2. TEACHING- Give details -**

No of Lectures wkly/ Monthly-  
No of Practical and clinics –  
No Seminars / Journal Club-  
Contribution to PG Teachings-  
Innovation In Teaching Technology-

## **3. PATIENTCARE/ PROFESSIONAL SERVICES/INNOVATION IN TEACHING**

### **Adequate Professional Service/ Responsibility**

(Continuation of desired professional work)

**a. Do you think you provided adequate professional service during the \_\_\_\_\_ year;**  
if no reason thereof;  
if yes, Then specify

- Introduction of the new procedure/test/improvisation of
- Existing service/innovation in teaching

Name of Service	Whether new to GMCH or improvisation	Year of start of new service	Marks

**b. Do you think you provided adequate professional service during the year;**

**If no reason thereof;**

**If yes, Specify in details**

## **4. MEMBERSHIP OF PROFESSIONAL BODIES (Only related to profession)**

Membership of professional bodies:

Name of the Professional Body	Whether life or annual membership

**b. Member Organizing Committee (Only related to one's own specialty)**

National/ International

Regional

CME

Name of the event/ Dates	Designation	Level

**5. ANY OUTSTANDING ACHIEVEMENT**

**a. Awards/ Fellowship in the year claimed**

International or national award/fellowship

Regional award/Fellowship

International observership /specialized training exceeding 2 weeks

National observership /specialized training exceeding one month

**(Only awards from recognized professional institutions/ bodies will be considered)**

Name of the award/ fellowship	Name of the awarding authority	Marks

**b. Membership of an editorial board/reviewer/referee:**

International journal

National/ Regional specialty journal

Reviewer/ Referee of Specialty journal

Name of the journal	Designation	Marks

**c. Executive position of a professional body City/ State/ National/ International (Only related to one's own profession):**

International

National

Regional including City

Name of the Professional Body	Designation	Marks

**6. Adversities issued by HOD and above If Any- (Provide Documents)**

Major Penalty Charge proved during the year

Minor Penalty Charge proved during the year

Written Warning

**Major/ Minor Penalties/ warnings awarded during the year:**

**Total marks (1-10) in Self-appraisal (Research+ Teaching +Professional/Patient Care+ Membership of professional bodies/ organizations +Outstanding Work – Adversities) \_\_\_\_\_**

**PART- II**

**REMARKS BY HEAD OF THE DEPARTMENT\***

**PLEASE GIVE MARKS (1-8) in each quality –**

**Outstanding- 8, Very Good-7, Good-6, Average-5, Below Average 4 and below.**

**\*HOD should be objective in his/her assessment of the faculty member. If any adverse remarks are made by HOD, it should be supported by documentary evidence. Only those documents, pertaining to the year under consideration, can be used through which HOD has already conveyed the adverse behavior/poor performance of the concerned faculty member to the competent authorities as well as to the concerned faculty member.**

1. How do you Rate the faculty based on self appraisal \_\_\_\_\_
2. Interest in general welfare of patients and attitude towards patients \_\_\_\_\_  
\_\_\_\_\_
3. Punctuality and regularity \_\_\_\_\_  
\_\_\_\_\_
4. Physical & mental fitness \_\_\_\_\_  
\_\_\_\_\_
5. Maintenance of Order & Discipline \_\_\_\_\_  
\_\_\_\_\_
6. Interpersonal Relations \_\_\_\_\_  
\_\_\_\_\_
7. Capacity for team work \_\_\_\_\_  
\_\_\_\_\_
8. Initiative for Innovations \_\_\_\_\_  
\_\_\_\_\_

**Average marks will you give him/her (Toal/8\*\*) \_\_\_\_\_**

**\*\* Marks 4 or below are indicative of adverse behavior/poor performance and should be supported by detailed comments and documents: \_\_\_\_\_**

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**PART- III**

**ASSESSMENT BY THE REPORTING OFFICER (DEAN /PRINCIPAL)**

1. Teaching and Professional Quality \_\_\_\_\_
2. Cooperation with the administration \_\_\_\_\_
3. Corruption/ Sincerity/ (Honesty) \_\_\_\_\_
3. Leadership \_\_\_\_\_
4. Overall assessment of personality assessment \_\_\_\_\_
5. Integrity \_\_\_\_\_

**How many marks will you give him/her (1-10) \_\_\_\_\_.**

**Total marks (Part I: Self appraisal + Part II: HOD + Part III: Reporting Officer) \_\_\_\_\_**

**Overall Grading:**

Outstanding	30 or more
Very Good	24 -29
Good	20 -23
Average	15 -19
Below Average	< 14

**Assessment by the Dean/ Principal( Reviewing officer): \_\_\_\_\_ -**

\_\_\_\_\_  
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Dated: Signature of Dean/Principal \_\_\_\_\_

Name in Block Letters \_\_\_\_\_

Designation \_\_\_\_\_



**PART- V**

Remarks by the Vice Chancellor (Senior Reviewing Officer): \_\_\_\_\_

\_\_\_\_\_

Dated:

Signature of Accepting Officer \_\_\_\_\_

Name in Block Letters \_\_\_\_\_

Designation \_\_\_\_\_