

CONFIDENTIAL

INDRAPRASTHA POWER GENERATION CO. LTD.

PRAGATI POWER CORPORATION LIMITED

ANNUAL ASSESSMENT REPORT : CATEGORY 'D'

For the Year :

| (If for part of the year, specify period | | |
|--|------|--|
| From : | To : | |
| | | |

| Name: | Employee No.: |
|---|------------------------------------|
| Designation: | Department: |
| Division: | Dt. of Entry in the present Grade: |
| Whether SC or ST or OBC: If not say 'Neither' | Date of Birth: |

ANNUAL ASSESSMENT: GUIDELINES FOR USE

- Responsibility for Assessment: Assessment for each employee will be done by the Reporting Officer (to whom the employee reports) - the minimum level for which should not be less than a S.O. and is to be reviewed by the reviewing officer (to whom the reporting officer reports) the minimum level for which will be an executive.
- 2. Where the employee has worked with more than one reporting officer for more than 3 months, he will be assessed by all the reporting officers, in separate forms.
- 3. The reporting officer should evaluate the attributes as corroborated by periodic records maintained and have sufficient evidence reflected during the entire period and not on isolated for recent incidents.
- 4. Each attribute should be assessed independently, uninfluenced by the rating of other attributes. Against attributes that are not applicable kindly write 'NA'.

It may be pointed out that the appraiser has the freedom not to evaluate an attribute for which he does not have sufficient data or which he does not consider relevant for the position of the appraisee.

| Emp. | No. | |
|------|-----|--|
| | | |

| | | Outstanding (Exceeds present job requirement) | Satisfactory (Meets present job requirement) | Unsatisfactory (Below Present job requirement) |
|----|--|---|--|--|
| 1. | Job performance | Max. | | |
| | Ability to perform | | | |
| | the job(s) assigned | | | |
| 2. | Safety and alertness | | | |
| 3. | Following of | | | |
| | Instructions | * | | |
| 4. | Dependability | | | |
| 5. | Amenability to | | | |
| | discipline | | | |
| б. | Punctuality and regularity | | | |
| | - oguini ity | •••••••••••••••••••••••••••••••••••••• | *************************************** | |
| 7. | Details of his | | | |
| | ability to acquire skills required for | | | |
| | skilled category of job | | | |
| | 01 300 | | | |
| | - X | | | |
| 8. | Cite incidents of breach of Comp In case of any disciplinary action | any Rules and features of mis , give details and nature of cha | conduct, if any. | |

| | Emp. No |
|---|---|
| TRAINING & CAREER DEVELOPMENT: (To | be filled by the Reporting Officer) |
| (a) Keeping in mind his/her (i) present assignment (ii employees should be given a rotational assignment skill? | capabilities (iii) future development, do you feel that the within or outside the section/department or an additional |
| (b) If yes, give details of the rotational assignment/ac | dditional skill: |
| With reference to his present assign With reference to his future develop | |
| (c) Approximate month when these recommendation | ns should take effect: |
| OVERALL ASSESSMENT: (To be filled by the Reporting Officer) | |
| Outstanding Good Aver (Consistently (Fairly (Perfor | 500 등 2 등 1 등 1 등 1 등 1 등 1 등 1 등 1 등 1 등 1 |
| exceptional High level general performance) of performance) require | lly as below the job mostly not ob requirement) meeting the |
| Name | Signature |
| Designation | Date |
| OVERALL ASSESSMENT: | |
| To be filled by the Reviewing Officer) | |
| | |
| Outstanding Good Ave | erage Below Average Unsatisfactory |
| FINAL RATING (in words) | |
| | |
| (U.S/GOOD/AVERAG | E/BELOW AVERAGE/UNSATISFACTORY) |
| Name | |
| Designation | . Signature |

Name

Designation

Date