NATIONAL HIGHWAY AUTHORITY

PERFORMANCE APPRAISAL FORM FOR DEPUTY DIRECTOR (REVENUE OPERATIONS) (Working on Contract basic)

(Working on Contract basis)

EVALUATION PERIOD	_TO
-------------------	-----

PART I

(TO BE FILLED IN BY THE OFFICER REPORTED UPON)

1.	Name (in block letter)	_Father's Name
2.	Date of birth	
3.	Date of entry in NHA Service	
4.	Post held during the period (with BPS)	
5.	Academic qualifications	
6.	Knowledge of languages	

7. Training received during the evaluation period

Name of course attended	Duration with dates	Name of institution and country

8. Period served

(i) In present post_____(ii) Under the reporting officer_____

PART II

(TO BE FILLED BY THE OFFICER REPORTED UPON)

1. Job description

PART III

(EVALUATION BY THE REPORTING OFFICER)

The rating in Part III should be recorded by initialing the appropriate box.

Job Description	Assessment	Initial by Reporting officer.
Monitor operations of Police Fine Collection (PFC) units	Outstanding	
Weigh Station, Tunnels and Toll Plazas on National	Above Expectations	
Highways & Motorways.	Meets Expectations	
	Unsatisfactory	
Conduct of the officer during the tenure	Outstanding	
	Above Expectations	
	Meets Expectations	
	Unsatisfactory	
Input of the officer for preparation and verification of audit	Outstanding	
paras.	Above Expectations	
	Meets Expectations	
	Unsatisfactory	
Monitoring the flow of Revenue/Fine	Outstanding	
	Above Expectations	
	Meets Expectations	
	Unsatisfactory	
Contract Administration such as levying penalties/recoveries	Outstanding	
etc.	Above Expectations	
	Meets Expectations	
	Unsatisfactory	
In case of shortfall measures taken to safeguard NHA interest	Outstanding	
	Above Expectations	
	Meets Expectations	
	Unsatisfactory	

- 1. Please comment on the officer's performance on the job as given in Part-II(2) with special reference to knowledge of work, quality and quantity of output. How far was the officer able to achieve targets? Do you agree with what has been stated in Part-II (2)?
- 2. Integrity (Morality, uprightness and honesty).

- 3. Pen picture with focus on the officer's strengths and weaknesses not covered in part III (weakness will not be considered as adverse entries unless intended to be treated as adverse)
- 4. Special aptitude.

5.	Overall	grading.
. .	O , OI all	SI GOILES!

		Signature of Reporting officer	Signature of Countersigning officer
(i)	Outstanding		
(ii)	Above Expectations		
(iii)	Meets Expectations		
(iv)	Unsatisfactory		

Fitness for Retention

		Reporting officer	Countersigning
(i)	Fit for Retention		
(ii)	Not fit for Retention		

6. Reasons to be recorded _____

Name of the reporting officer_	Designation
(Capital letters)	

Date ____

PART IV

(REMARKS OF THE COUNTERSIGNING OFFICER) 1. CLEARANCE FROM AUDIT PARAS:-

a. It is hereby certified that there is no Audit Para pending against the officer reported upon during the period under review.

Audit Para(s)	Signature of the Countersigning Officer
Yes/No	

b. Following Audit Para / Paras has / have been reported / observed against the officerreported upon during the period under review by Internal/External Audit. (Please mentioned all the Audit Para)

2. How well do you know the officer? If you disagree with the assessment of the reporting officer, please give reasons.

3. Evaluation of the quality of assessment made by the reporting officer.

	Exaggerated	Fair	Bi	ased
Name of the	countersigning offic	er	Signature	2
(Capital letter	rs)			
Designation			Date	