



**PRAVARA RURAL EDUCATION SOCIETY'S
PRAVARA RURAL COLLEGE
OF PHARMACY
LONI**

INDEX

Criteria No. : 6 - Governance, Leadership and Management Key

Key Indicator : 6.3 Faculty Empowerment Strategies (30)

Metric No. : 6.3.5 (QIM) - 5M

**File Name : Institutions Performance Appraisal System for
teaching and non-teaching staff**

(Academic Year 2023-2024)

Sr. No	Content
1	SSR- Response
2	Sample copy of Appraisal form
3	Appraisal form of teaching and non-teaching staff year wise



Principal
Pravara Rural College of Pharmacy
Pravaranagar, A/p.Loni-413 736



प्रवरा ग्रामीण शिक्षण संस्थेचे
प्रवरा ग्रामीण औषधनिर्माणशास्त्र महाविद्यालय, (पदवी) प्रवरानगर
मु.पो. तोणी-४१३७३६, ता. राहाता, जि. अहमदनगर (महाराष्ट्र राज्य)
फोन.नं. (एस.टी.डी. :०२४२२) ऑ. २७३५२६, प्रा. २७३५२८ फॅक्स २७३५२८



दिनांक:- / /२०

गोपनीय अहवाल

१. सेवकाचे पूर्ण नांव

पूर्ण पत्ता

फोन नं. व ई.मेल

२. हुद्या

३. नेमणूक दिनांक

४. एकूण सेवा

५. जन्म तारीख

६. शैक्षणिक पात्रता (नेमणुकीचे वेळी):

नेमणुकी नंतर वाढवलेली

शैक्षणिक पात्रता

७. सध्याची वेतनश्रेणी, मुळ पगार

एकूण पगार व इतर अलीन्स इ.

८. सध्याचा कामाचा विभाग व

कामाचे स्वरूप

सेवकाची सही

९. विभाग प्रमुखांचा कामाबाबतचा अभिप्राय :

अ) कामावर वेळेवर येतात काय ?

ब) रजेचे / गैरहजर राहण्याचे प्रमाण

क) वरिष्ठांशी व सहका-यांशी वागणूक

ड) शोरा.

कार्यालय अधीक्षक / विभाग प्रमुखाची सही

१०. प्राचार्यांचा अभिप्राय व शिफारस

प्राचार्यांची सही

Pravara Rural Education Society's
Pravara Rural College of Pharmacy, Pravaranagar

Ref No:

Date: / / 20

ANNUAL INCREMENT FORM NON-TECHINING

Report to be submitted for claiming of increment by the staff member.

1. Name : _____
2. Designation : _____ Department _____
3. Permanent / Temporary : _____
4. Date of Joining : _____ Date of Scale : _____
5. Date of Increment : _____

Signature of Staff

Remark of HOD.

1. Attendance : _____
2. Performance of work : _____
3. Any other report : _____

Signature of HOD

NOTE BY OFFICE :

Yearly increment of Shri/Smt. _____
Designation _____ is due on 01 / 07 / 2018 His/her present basic pay is
Rs. _____ in the pay band of Rs. _____ + AGP Rs. _____.
After release of increment his/her basic pay will be Rs. _____ & AGP
Rs. _____ w.e.f. 01/07/2018.

His/Her annual increment may please be sanctioned.

Signature of dealing clerk

Office Superintendent

(ORDER)

Yearly increment of Shri/Smt. _____ is
Sanctioned / Not sanctioned as above.

PRINCIPAL

Copy to :

1. Account Section,
2. Personal file

PRAVARA RURAL EDUCATION SOCIETY, PRAVARANAGAR

Name of the Institute/College:

1. Name of the staff :
2. Name of Department :
3. Present Designation : present salary:
4. Total Experience :
 - a) Total approved experience :
 - b) Permanent approval No & date:
 - c) Academic approval No & date :
5. Qualification at the time of joining & date :M pharm
(Mention against each degree: Full time/part-time/correspondence /distance education etc)

Course	Diploma	UG (B.E./B.Tech/ B. Pharm/B.Arch etc)	P.G. (M.E./M.Tech/ M. Pharm/M.Arch etc)	Ph.D.	Others (NET/SET/GATE)
Date of Completion					

6. Additional qualification obtained after joining the institute:
7. Research paper publication in last 3 years (Nation/International) :
 - A) Journals

Sr. No.	Title with page no.	Journal	ISSN/IS BN No.	Whether Peer reviewed, Impact factor, if any	No. of Co- authors	Whether you are the main author?

B) Conference (National/International)

Sr. No.	Title with page no.	Details of Conference Publication	Whether Peer reviewed,	ISSN/ ISBN No.	No. of Co- authors	Whether you are the main author ?

8. Seminar & Workshop in last 3 years (attended/organized)

Sr. No.	Program	Duration	Organized by

9. Placement Contribution :

10. Specific work done for NAAC/NBA:

11. MoU with different industry & Institute in last 3 years:

a) MoU with alumni

b) MoU with industry other than Alumni

12. Real time data collected for alumni till date by you:50%

13. Research proposals, Funds/grants in last 3 years:

Sr. No.	Title	Agency	Period	Grant/Amount mobilized (Rs. lakh)

14. Patents/book's publication (if any):

15. Admissions in your department in last 5 years :

Year					
No. of Admissions					

16. Efforts taken to improve for the admission in last 5 years and number of students admitted:

17. Any additional responsibility if you wish to state-

18. Plans for next one year target:

A) Research/consultancy:

B) Publications:

C) Admission:

D) Placements:

E) Activities at department & college level :

F) Interaction with alumni :

G) Contribution in newsletters of the department /Institute:

H) Any other

Place: Loni

Date:

Signature with date

Note: **Submit supporting documents for your claim**