**GCPP.—**160 132-2,000 Cps. (1506)—30-7-2019.

GOVERNMENT OF PUDUCHERRY

 ANNUAL PERFORMANCE ASSESSMENT REPORT OF SUPERINTENDENT

Department / Office of: **PERSONNEL & ADMINISTRATIVE REFORMS, PUDUCHERRY**

Report for the year/ period from 01.04.2020 to 31.03.2021

**PART-1 A**

PERSONAL DATA

*(To be filled by the Department/ Office)*

1. Name of Officer : M. JAYACHANDRAN

2. Date of Birth (DD MM YYYY) : 21.11.1980

 In words: Twenty First November Nineteen Eighty

3. Designation / Post held : Superintendent

4. Date of continuous appointment to the present grade : Date: 01.01.2010 Grade: Superintendent

5. Whether Permanent / Temporary / Ad-hoc / Regular? : Regular

6. Sections in which served during the year/ period under :

 report and the period of service in each.

7. Period of absence from duty (on training/leave etc.) :

during the period. (If he / she has undergone training,

specify)

PART-1 B

1. Name and designation of the Reporting Officer **:**

2. Name and designation of the Reviewing Officer **:**

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PART-2

SELF-APPRAISAL

(To be filled-in by the Officer reported upon)

(Please read the instructions carefully before filling the entries)

1. Brief description of duties:

1. Please specify targets / objectives / goals (in quantitative or other terms) of work you set for yourself or that were set for you, eight to ten items of work in the order of priority and your achievement against each target (if applicable). [Example: Annual Action Plan for your Division]

|  |  |
| --- | --- |
| Targets / Objectives / Goals | Achievements |
|  |  |

3

1. (A) Please state briefly the shortfalls with reference to the targets /objectives /goals referred to in item 2. Please specify constraints in achieving the targets.

(B) Please also indicate items in which there have been significantly higher achievements and your contribution thereto.

4. Please state whether the annual return on immovable property for the preceding calendar year was filed within the prescribed date /. e. 31st January of the year following the calendar year. If not, the date of filing the return should be given. (To be filled it applicable)

Place : **Puducherry**

Date : **18.06.2020**

***Signature of Officer reported upon***