



क्षेत्रीय आयुर्विज्ञान संस्थान, इंपाल: मणिपुर
REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL, MANIPUR
(स्वास्थ्य और परिवार कल्याण मंत्रालय, भारत सरकार के अंतर्गत एक स्वायत्त संस्थान)
(An Autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

Phone : 0385- 2414720
0385-2414750
e-mail : rims@rims.edu.in
website : www.rims.edu.in

No. B/2926/2024-RIMS:

Dated the 12th July, 2024

C I R C U L A R

Subject: Instructions/guidelines relating to filling up of Annual Performance Appraisal Report (APAR) Form for non – faculty employee of RIMS, Imphal.

The process of completing Annual Performance Appraisal Report (APAR) for the year 2023- 2024 is being initiated.

2. The basic principle for APAR rests on the fact that the officer reported upon, the Reporting Officer and the Reviewing Officer should undertake the duty of filling up the form with a high sense of responsibility as APAR provides the basic and vital inputs for assessing the performance of the officer reported upon and for his/her advancement in career. Accordingly, a comprehensive guideline "Instructions on APAR" is enclosed for guidance.


3. Hence, it is of prime importance that the said instructions are scrupulously followed while filling up the APAR by officers reported upon/Reporting Officers/Reviewing Officers. Further, it should also be ensured that the APAR must be complete in all respects, as incomplete APAR cannot be relied upon for a fair and effective assessment of the officer concerned.

4. The remarks of Reporting/Reviewing Officers in APAR must also be consistent with the grading given by them under various attributes/overall grading and also ensure that their remarks are not cryptic, vague or non-committal. The Officer recording the remarks must realize the importance of entries made by him/her and write them with greatest possible care. Further, in case the overall numerical grading given by the Reviewing Officer differs from the overall numerical grading given by the Reporting Officer by more than 2 numerical grades, reasons for the same are required to be given by the Reviewing Officer, who is also required to comment on any other area of disagreement. Slightest default or negligence on the part of Reporting/Reviewing Officer may lead to grave injustice to the officer reported upon by marring his/her future.

5. Accordingly, all officers/officials of the RIMS, Imphal, are requested to scrupulously follow the instructions/guidelines relating to filling up of APAR.

6. Instructions on APAR, time-schedule, SLIP-A, B & C are available on <http://rims.edu.in/>. Hard copy of the above documents will not be provided separately.

7. This issues with the approval of Director, RIMS, Imphal.


(R.K. Mecolt Singh)
Deputy Director (Admin)

Copy to:

1. P.S. Director, RIMS, Imphal – For kind information to the Director.
2. The Medical Supdt., RIMS, Hospital, Imphal.
3. The Principal, Dental College, RIMS, Imphal.
4. The Principal, College of Nursing, RIMS, Imphal.
5. All Head of Departments / Units / Sections, RIMS, Imphal
6. All Officers/Sections/P.Ss/P.As & Pay & Accounts Office
7. All hostel Wardens, RIMS, Imphal.
8. All S.O. RIMS /RIMSH
9. System Administrator – for uploading on RIMS, wed site
10. Notice Board

They are request to bring the above circular to the staff working under their control.



क्षेत्रीय आयुर्विज्ञान संस्थान, इंपाल: मणिपुर

REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL, MANIPUR

(स्वास्थ्य और परिवार कल्याण मंत्रालय, भारत सरकार के अंतर्गत एक स्वायत्त संस्थान)

(An Autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

Phone : 0385- 2414720

0385-2414750

e-mail : rims@rims.edu.i

website : www.rims.edu.i

INSTRUCTIONS ON APAR

1. The Annual Performance Appraisal Report is an important document, it provides the basic and vital inputs for assessing the performance of an officer and for his/her further advancement. The officer reported upon, the Reporting Officer and the Reviewing Officer should, therefore, undertake the duty of filling out the form with a high sense of responsibility.
2. Reporting Officers and Reviewing Officer should realize that the objective is to develop an officer so that he/she realizes his/her true potential. It is not meant to be a fault finding process but a developmental one. The Reporting Officer and Reviewing Officer should not shy away from reporting shortcomings in performance, attitudes or overall personality of the officer reported upon.
3. The items should be filled with due care and attention and after devoting adequate time. Any attempt to fill the report in a casual or superficial manner will be easily discernible to the higher authorities.
4. Every answer shall be given in a narrative form except where numerical grading is to be awarded. The space provided indicates the desired length of the answer. Words and phrases should be chosen carefully and should accurately reflect the intention of the officer recording the answer. Unambiguous and simple language may be used.
5. It should be the endeavour of each appraiser to present the truest possible picture of the appraisee in regard to his/her performance, conduct, behaviour and potential.
6. Assessment should be confined to the appraiser's performance during the period of report only.
7. The time schedule for the completion of the APAR for the year 2023 – 2024 as at Annexure-I should be strictly adhered to. Entries on the slips attached, as the Annexure – II be made by the concerned officers at every stage and sent to Estt. (General) Section on the same day without fail.
8. These instructions are not exhaustive but only broad general guidelines on the subject and an individual Reporting/ Reviewing Officer may devise his/her own methods of assessment. However, the emphasis should be on making an objective assessment of an individual reflected through his / her APAR.
9. The following procedure should be followed in filling up the item relating to integrity:-
 - (i) If the officer's integrity is beyond doubt, it may be so stated.
 - (ii) If there is any doubt of suspicion, the item should be left blank and action taken as under:-
 - (a) A separate secret note should be recorded and followed up. A copy of the note should also be sent together with the Confidential Report to the next superior officer who will ensure that the follow up action is taken expeditiously. Whether it is not possible either to certify the integrity or to record the secret note, the Reporting Officer should state either that he has not watched the officer's work for sufficient time to form a definite judgement or that he has heard nothing against the officer as the case may be.

12/07/24



क्षेत्रीय आयुर्विज्ञान संस्थान, इंफाल: मणिपुर
REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL, MANIPUR
(स्वास्थ्य और परिवार कल्याण मंत्रालय, भारत सरकार के अंतर्गत एक स्वायत्त संस्थान)
(An Autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

Phone : 0385-2414720
0385-2414750
e-mail : rims@rims.edu.i
website : www.rims.edu.i

- 2 -
- (b) If, as a result of the follow-up action the doubts or suspicious are cleared, the officer's integrity should be certified and an entry made accordingly in the Confidential Report.
 - (c) If the doubts or suspicions are confirmed, the fact should also be recorded and duty communicated to the officer concerned.
 - (d) If as a result of the follow up action, the doubts or suspicious are neither cleared nor confirmed the officer's conduct should be watched for a further period and thereafter action taken as indicated at (b) and (c) above.
10. Full APAR, including the overall grade and assessment of integrity, shall be disclosed to the officer reported upon in the manner as stated hereinafter by the Estt. (General) Section after it is received by it.
 11. A photocopy of the completed APAR along with disclosure certificate shall be sent to the officer reported upon by Estt (General) section.
 12. Any officer wishing to make a representation against the entries and / or the gradings given in his APAR shall do so within fifteen days from the date of receipt of a copy of APAR. In case no representation is received from an officer within the said period of fifteen days, it shall be deemed that he/she has no representation to make and his APAR shall be treated as final. No further opportunity after this period shall be given to, any officer for making any representation.
 13. Representation submitted by an officer within 15 days in pursuance to para 14 above shall be submitted to an authority which is superior to the reviewing officer of the concerned officer for decision and such superior authority shall take a decision on it.
 14. No cutting/ overwriting should be done in APAR Forms. If the same is unavoidable, the officer should append his / her signature on the part which has the cutting/ overwriting.
 15. In case of APARs of attendants, who are attached to officers, the concerned officer should fill up only the columns of Reviewing Officers in Part III, the officer shall also fill up the whole of Part -IV & Part - V before sending it to the Estt (General) Section.
 16. The officer being reported upon, the Reporting Officer and the Reviewing Officer, should specify the date of filling up of the respective parts of the APAR below their signature.

12/07/24

**TIME – SCHEDULE FOR SUBMISSION OF ANNUAL PERFORMANCE APPRAISAL
REPORT**

Nature of Action	Date by which to be completed
1. Distribution of blank APAR Forms to all Concerned .	: 12 th July, 2024 (Friday)
2. Submission of self – appraisal to reporting officer by officer to be reported upon .	: 16 th July, 2024 (Tuesday)
3. Submission of report by reporting officer to reviewing officer .	: 27 th July, 2024 (Saturday)
4. Report to be completed by Reviewing Officer and sent to Administration or APAR Section/Cell.	: 8 th August, 2024 (Thursday)

[Handwritten signature]
12/07/24

**Regional Institute of Medical Sciences
Imphal, Manipur**

Annual Performance Appraisal Report

For Non - Faculty Employees of RIMS, Imphal

Name of officer :

Report for the year / Period :

Annual Performance Appraisal Report

PART - I

Ministry/Department/Office

For the year / Period

1. Name :

2. Date of birth :

3. Designation / Post held :

4. Date of continuous appointment to the grade :

5. Present post and date of appointment there to:

6. Period of absence from duty (on training , Leave etc) during the year , if he / she under gone training specify

PART - II (TO BE FILED IN BY OFFICER REPORTED UPON)

(Please read carefully the instructions before filling the entries)

1. Brief description of duty :

--

2. Please specify target / 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 (Example Annual Action Plan for your Division) .

Target / Objective / Goals	Achievement

3. Please state briefly , the shortfall with reference to the target / objectives / goals , referred to in item 2. Please specify constraints if any , in achieving the target .

--

4. Please also indicate items in which have been significantly higher achievement and contribution thereto .

--

- 5 . Please state whether the annual return on immovable property for the preceding calendar year was filed within the prescribed date i.e. 31st January of the year following the calendar year . If not , the date of filling the return should be given. (**Note : Group C is not included**)

--

Date :

Signature of officer reported upon

Part – III

Numerical grading is to awarded by Reporting and Reviewing Authority, which should be on a scale of 1 to 10, where 1 refers to the lowest grade and 10 to the highest.

(**Please read carefully the guidelines before filling in the entries**)

- (1) Assessment of work output (weightage to this section would be 40 %)

Sl. No.		Reporting Authority	Reviewing Authority
i.	Accomplishment of planned work / work allotted as per subjects allotted		
ii	Quality of output		
iii	Analytical ability		
iv	Accomplishment of exceptional work / unforeseen tasks performed		
	Overall grading on work output		

(2) . Assessment of personal attributes (weightage to this section would be 30 %)

Sl. No.		Reporting Authority	Reviewing Authority
i.	Attitude to work		
ii.	Sense of responsibility		
iii.	Maintenance of Discipline		
iv	Communication skills		
v	Leadership qualities		
vi	Capacity to work in team spirit		
vii	Capacity to adhere to time – schedule		
viii	Inter – personal relations		
ix	Overall bearing and personality		
	Overall grading on Personal attributes		

(3).Assessment of function competency (weightage to this section would be 30 %)

Sl. No.		Reporting Authority	Reviewing Authority
i.	Knowledge of rules / Regulation / Procedures in the area of function and ability to apply them correctly		
ii.	Strategic planning ability		
iii.	Decision making ability		
iv.	Co - ordination ability		
v.	Ability to motivate and develop subordinates		
vi	Initiative		
	Overall grading on functional competency		

Signature of the Reporting officer

Date :

Signature of the Reviewing officer

Date :

PART – IV

(To be filled by the Reporting Officer)

1. Relation with the public (wherever applicable)

(Please comment on the Officers accessibility to the public and responsiveness to their needs)

2. Training

(Please give recommendation for training with a view to further improving the effectiveness and capabilities of the officer)

3. State of health

4. Integrity

5. Pen picture by Reporting Officer (In about 100 words) in the overall qualities of the officers including area of strengths and lesser strength , extraordinary achievement , significant failures and attitude towards weaker sections .

6. Overall numerical grading on the basis of weightage given in Section A, B, C, in part 3 of the Report .

Place :

Signature of the reporting officer

Name in block letters :

Designation

Date :

During the period of Report

PART - V
(To be filled by the Reviewing Officer)

1. Length of service under the reviewing officer

2. Do you agree with the assessment made by the reporting officer with respect to the work output and the various attributes in Part - 3 & Part - 4 ? Do you agree with the assessment of reporting officer in respect of extraordinary achievement / significant failures of the officer reported upon ? (Ref: Part - 3 (A)(iv) and Part - 4(5))
(In case you do not agree with any of the numerical assessment of attributes please record your assessment on the column provided for you in that section and initial your entries.

YES	NO
-----	----

3. In case of disagreement please specify the reason . Is there anything you wish to modify or add ?

4. Pen picture by Reviewing officer Please comment (In about 100 words) on the overall qualities of the officer including area of strengths and lesser strength and his attitude towards weaker section .

5. Overall numerical grading on the basis of weightage given in Section - A , Section - B and Section - C in Part of the Report.

Place :

Date :

Signature of the reviewing officer

Name in block letters :

Designation

During the period of Report

RIMS, IMPHAL
(To be filled by the Officer reporting upon)

SLIP - A

I Designation have submitted my APAR form for the period/year to the Reporting Officer, namely, Shri/Ms Designation (Tele.....) on after completing Part - II of the APAR Form.

Signature :

Name :

Designation :

Dept./Section :

Tele No. :

Dated :

Estt. (General Section)

✕.....

RIMS, IMPHAL
(To be filled by the Reporting Officer)

SLIP - B

The undersigned has forwarded the APAR of Shri/ Ms..... Designation for the period/year to the Reviewing Officer, namely, Shri/Ms Designation on..... after recording my comments as Reporting Officer.

Signature :

Name :

Designation :

Dept./Section :

Tele No. :

Dated :

Estt. (General Section)

✕.....

RIMS, IMPHAL
(To be filled by the Reviewing Officer)

SLIP - C

APAR of Shri/Ms. Designation for the period/year duly reviewing by the undersigned is forward herewith.

Signature :

Name :

Designation :

Dept./Section :

Tele No. :

Dated :

Estt. (General Section)