DELHI JAL BOARD: DELHI SARKAR VARUNALAYA PHASE-II, KAROL BAGH NEW DELHI-110005.

CONFIDENTIAL REPORT OF CHIEF ENGINEER

PART-I—Personal Data and Duties & Responsibilities: --- (to be filled by the Administrative Section concerned)

		,						
1.	Period of Report							
2.	Name of Officer							
3.	Father's/Husband's Name							
4.	Date of Birth							
5.	Date of continuous appointme present grade	Date of continuous appointment to the present grade						
6.	Present residential address	+						
7.	Post held during period of rep	ort						
8.	Period of absence from duty o	Period of absence from duty on leave, training etc.						
	during the year							
9.	Key items of the duties and re	sponsibilities of the						
	post in order of importance (ca	are is to be taken that						
	no item is left out).							
0.	Reporting & Reviewing authoriti	es during the period of Repor	ť:-					
		Name	Designation					
Repor	ting Authority		Member(WS)					
		9000100	Member(Dr.)					
Revie	wing Authority							
eise turines.								

PART-II—(A) Self Appraisal:-(to be filled by the Officer reported upon)

1. Academic and professional achievement during the year including degree obtained, books/article published etc. The training course attended during the reported year need also be mentioned.

- 2. Enumerate items of task and targets : assigned to the officer for completion during the year/period from..... to
- 3. Inspections carried out by : EE/SE/CE/Jt, Directors/Dy, Directors during the year with outcome
- 4. Please state whether the annual return on movable/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 filing the return should be given
- 5. The ACRs of all the staff working : under my control during the report period have been filled up and handed over to the Reviewing/Accepting authority
- Total Nos. of ACR reported and : reviewed

PART-III Assessment by the Reporting Officer on scale 1-10:
Numerical grading is to be awarded for each of the attributes by reporting authority which should be on a scale 1-10, where 1 refers to the lowest grade and 10 to the highest.

Grading given by M(WS)

a)	Does the Reporting Officer agree with all that is recorded under Part-II by the Officer. If not enumerate precisely the extent of disagreement with and reasons therefore?	ŧ		
b)	General comment on the results achieved and the quality of performance and application of knowledge, delegated authority and conceptual and professional skills on the job.	b		
c)	Comments clearly and in an unambiguous terms on the following attributes of the officer in relation to his performance:	r.		*
(i)	Commitment to the tasks assigned			
(ii)	Devotion to duty	:		
(iii)	Human relations (his conduct with colleagues, superiors and subordinates and capacity to get work done)	:		
(iv)	Public relation			
(v)	Intellectual honesty, reactivity and innovative qualities	:	Manager Company Compan	
(vi)	Integrity (Please comment on the integrity of the officer)	1		
d)	Please indicate if on any of the item in this part the Reporting Officer administered any written or oral warning or counseling and how the officer reacted thereafter	1		
			0.	
			Signature of Reporting officer	
			Name in Block Letters	•••••

ART-III Assessment by the Reporting Officer on scale 1-10:
Numerical grading is to be awarded for each of the attributes by reporting authority which should be on a of 1-10, where 1 refers to the lowest grade and 10 to the highest.

Grading given by M(DR.)

a)	Does the Reporting Officer agree with all that is recorded under Part-II by the Officer. If not enumerate precisely the extent of disagreement with and reasons therefore?	<u> </u>	***************************************
b)	General comment on the results achieved and the quality of performance and application of knowledge, delegated authority and conceptual and professional skills on the job.	i	
С)	Comments clearly and in an unambiguous terms on the following attributes of the officer in relation to his performance:	į	**************************************
(i)	Commitment to the tasks assigned	1	To the second se
(i	i)	Devotion to duty	ŧ	
(i	iii)	Human relations (his conduct with colleagues, superiors and subordinates and capacity to get work done)		
(1	iv)	Public relation	I .	
(v)	Intellectual honesty, reactivity and innovative qualities	1	
(vi)	Integrity (Please comment on the integrity of the officer)		
d)	Please indicate if on any of the item in this part the Reporting Officer administered any written or oral warning or counseling and how the officer reacted thereafter	i .	
				Signature of Reporting officer/Member(Dr.)
				Name in Block Letters
1	Average	e numerical grading given by M(WS) & M(Dr.)		

- Length of service under the Reviewing
 Officer
- Does the Reviewing Officer fully agree with the remarks of the Reporting Officer recorded in Part-III of the proforma. If he does not agree with any adverse remarks of the Reporting Officer, those remarks should be specifically mentioned for expunction or modification
- 3. If the officer reported upon is a member of Scheduled Caste/Tribe, please indicate specifically whether the attitude of the Reporting Officer in assessing the performance of the SC/ST Officer has been fair and just.
- 4. Is the officer reported upon specifically suited for particular job (including his/her role and responsibility as Revenue Incharge of the Division? If so the nature of placement should be suggested.
- Aptitude and potentials of the officer : reported upon and suggestion for possible lines of growth and development.
- 6. Overall Grade on scale 1-10:

Signature of	the Reviewing Officer
Name in Blo	ck Letters
	Designation
	Date

DELHI JAL BOARD: DELHI SARKAR VARUNALAYA PHASE-II, KAROL BAGH NEW DELHI-110005.

CONFIDENTIAL REPORT OF EXECUTIVE ENGINEERS (E&M) WTPs INCHARGE Not Valid For Other Engineers

PART-I-Personal Data and Duties & Responsibilities: ---(To be filled by the Administrative Section concerned) 1. Period of Report 2. Name of Officer 3. Father's/Husband's Name 4. Date of Birth 5. Date of continuous appointment to the present grade 6. Present residential address 7. Post held during period of report Period of absence from duty on leave, 8. training etc. during the year 9. Academic and professional achievement during the year including degree obtained, books/article published etc. The training course attended during the reported year may also be mentioned 10. Reporting, Reviewing & Accepting Authorities during period of report: Name & Designation Reporting Authority Reviewing Authority

Accepting Authority

Employee	Name:
Employee	Code:
Employee	Signature:

PART -II (To be filled by Designated Officer In charge of record keeping except remarks column which need to be in by the officer being reported upon and this page to be jointly signed by both the officers)

- Plant Details1:
- i) Name of Plant and locations:
- ii) Year of commissioning
- iii) Design capacity including recycling
- iv) Out sourced or DJB operated
- v) No. of flow meter installed -

Parameters	Year of Report	One Year Previous	Two year Previous	Remarks
Average production of Water per day(MGD)				
Peak day production of Water in MGD				
Cost of production of Water ² per MGD				
➤ Power Cost per MGD				
Power Consumed in units KVAH per MGD				
No. of Staff posted (for O&M up to level of Foreman) in Plant				
 No. of Major/Rehabilitation/ Renovation /Extension works Executed. (Details of the Works with cost) shown in separate Sheet 				

Signatu	ıre	 				٠										
Name	,,	 	 	٠			. ,	•	٠	٠	•	•	٠	*	i.	
Design	ation	 			 			٠		٠				•	•	

Employee	Name:
Employee	Code:
Employee	Signature:

¹ In case of more than one plant add separate sheet

² Total Expenditure i.e. Raw Water cost, carrier maintenance cost, Power, Maintenance, Staff, Chemicals and consumables etc. Maintenance cost does not include the cost of Major works as specified above in last row.

3			
PART-III—Self-Appraisal:- (To be filled by the Officer Reported upon)		1	
1. Status of Flow Meter - No. of Functional: (Period to be specified)		÷ '	- 4
No. of Non-Functional: (Period to be specified)			
2) Quality of water produced			
3) Any Major Break Down			
4) No. of instances of unauthorized /unplanned shutdow	n:		
5) Any Exceptional event during Reporting Period :			
6) Performance of associated infrastructure such as boos	ster plant :		
7) Brief description of duties:			
		*	
8) Annual Work Plan and Achievement:			¥
Task to be performed	Actual achievement		

Employee	Name:
Employee	Code:
Employee	Signature:

1.	During the period under report, do you believe that you have n successful completion of an extraordinarily challenging task or ma significant benefits to the public and/or reduction in time and costs)? (within 100 words).	for systemic improvement (resulting in
	•	
2	What are the factors that hindered your performance?	
2.	what are the factors that inhidered your performance.	
2	Please indicate specific areas in which you feel the need to upgrade	your skills through training programs:
٥.	Please indicate specific areas in which you reet the need to approach	jour same and g
*	For the current assignment:	
*	For your future career	
4	Delegation :	
4.	Declaration:	
F	lave you filed your immovable property return, as due?	
	f Yes, please mention date.	
		S. J. N.
		Employee Name:
		Employee Code:
		Employee Signature:

PART	-IV (i) Assessment of Reporting Officer:-		3.
a)	Does the Reporting Officer agree with all that is recorded under Part-II and Part - III? If not enumerate precisely the extent of disagreement with and reasons therefore?	1 17 4 7	÷
b)	General comment on the results achieved and the quality of performance and application of knowledge, delegated authority and conceptual and professional skills on the job.		
c)	Comments clearly and in an unambiguous terms on the following attributes of the officer in relation to his performance:		
(i)	Commitment to the tasks assigned	1	
(ii)	Devotion to duty	1	
(iii)	Human relations (his conduct with colleagues, superiors and subordinates and capacity to get work done)		
(iv)	Public relation	* 3	
(v)	Intellectual honesty, creativity and innovative qualities	□ □	
(vi)	Integrity	i)	
d)	Please indicate if on any of the item in this part the Reporting Officer administered any written or oral warning or counseling and how the officer reacted thereafter	1	
	GRADING: OUTSTANDING/VERY GOOD (if Below Bench Mark or Outstanding Gradin	D/GOOD/AVERAGE/BELOW AVE g is given, then reason may also be n	RAGE nentioned)
	Signature of the	ne Reporting Officer	
	Name in Bloc	k Letters	

Designation....

Date

Employee Name:....

Employee Code:....

PART-V—Remarks o	f the	Reviewing	Officer:-
------------------	-------	-----------	-----------

- Length of service under the Reviewing
 Officer
- 2. Does the Reviewing Officer fully agree : with the remarks of the Reporting Officer recorded in Part-III of the proforma. If he does not agree with any adverse remarks of the Reporting Officer, those remarks should be specifically mentioned for expunction or modification
- 3. If the officer reported upon is a member : of Scheduled Caste/Tribe. please indicate specifically whether the attitude of the Reporting Officer in assessing the performance of the SC/ST Officer has been fair and just.
- 4. Is the officer reported upon specifically: suited for particular job (including his/her role and responsibility as Revenue In charge of the Division? If so the nature of placement should be suggested.
- Aptitude and potentials of the officer: reported upon and suggestion for possible lines of growth and development.

Signature of the Reviewing Officer
Name in Block Letters
Designation
Date

PART-VI—Remarks of Accepting Authority:--

Signature	************
Name & Designation	
Date	

Employee Name:
Employee Code:
Employee Signature:

DELHI JAL BOARD: DELHI SARKAR VARUNALAYA PHASE-II, KAROL BAGH -NEW DELHI-110005.

CONFIDENTIAL REPORT OF EXECUTIVE ENGINEERS (E&M) INCHARGE STPs Not Valid For Other Engineers

PART-I—Personal Data and Duties & Responsibilities: --- (To be filled by the Administrative Section concerned)

	initial of the statistical	re deciron concerned	. /	
1.	Period of Report			
2.	Name of Officer			
3.	Father's/Husband's Nar	me		
4.	Date of Birth			
5.	Date of continuous apportant grade	pintment to the		<u>.</u>
6.	Present residential addre	ess		
7.	Post held during period	of report		
8.	Period of absence from	duty on leave,		
	training etc. during the	vear		
9.	Academic and profession during the year including books/article published course attended during to may also be mentioned	g degree obtained, etc. The training		
10.	Reporting, Reviewing	& Accepting Author	ities duri	ng period of report:
		Name & Designatio	on	
Report	ng Authority			
Review	ing Authority			
Accept	ing Authority	Carlo State Control Control		
				Employee Name:
				Employee Code:
				Employee Signature:

PART -II (To be filled by Designated OfficerIn charge of record keeping except remarks column in the table below t filled in by the officer being reported upon and this page to be jointly signed by both the officers)

- Plant Details¹:
 - i) Name of Plant and location
 - ii) Year of commissioning
 - iii) Design capacity
 - iv) Designed parameters
 - v) Out sourced or DJB operated
 - vi) No. of flow meter installed
 - vii) Power generation capacity
 - viii) Gas production capacity

	Parameters	Year of Report	One Year Previous	Two year Previous	Remarks
	Average treatment of Sewage per day(MGD)	25			
	Peak day treatment of sewage in MGD				
	Cost of treatment of Sewage ² per MGD				
>	Power Cost per MGD				
A	Power Consumed in units (KVAH) per MGD				
A	No. of Staff (O&M) posted in Plant (up to the level of Foreman)				
A	Quantity of treated effluent sold /utilized /recycled				
×	Gas Produced				
A	Power generated	3,			
×	No. of Major/Rehabilitation/Renovation /Extension works executed. (Details of the Works with cost, be added in separate Sheet)	8.2			

Name:	٠.	•	 • (1
Designations:	• •	•) •	

Signature

F	Emp	ploy	ee	Name:	 	•••	٠.,	•••	 ••	•••	 	• •	• • •

Employee Code:....

In case of more than one plant add separate sheet

² Total Expenditure i.e. Power, Maintenance, Staff (O&M), Chemicals and consumables etc. Maintenance cost does not include the cost of Major works as specified above in last row.

PART-	-III—	- Self-A	Appraisa	1:-	
(To be	filled	by the	Officer	Reported	upon)

1.	Status of Flow	Meter – No. of Functional:
		(Period to be specified)

No. of Non-Functional: (Period to be specified)

2.	Parameters achieved of treated effluent:	
	(Yearly average)	

- 3. No of instances of Quality parameter not achieved :
- 4. Any Major Break Down:
- 5. No. of instances of unplanned bypass with reasons:
- 6. Any Exceptional event during Reporting Period :
- 7. Performance of associated infrastructure such as SPS and rising main:
- 8. Brief description of duties:
- 9. Annual Work Plan and Achievement:

Task to be performed	Actual achievement
	•
¥	•
	•
	•
	•
	•
	•
	•

Employee	Name:
Employee	Code:
Employee	Signature:

PART-IV	(i)	Assessment	of I	Reporting	Officer:-
I WILL I	1)	11330331110111	0.	topoliting.	J

PART	-IV (i) Assessment of Reporting Officer:-	
a)	Does the Reporting Officer agree with all that is recorded under Part-II and Part III? If not enumerate precisely the extent of disagreement with and reasons therefore?	9
b)	General comment on the results achieved and the quality of performance and application of knowledge, delegated authority and conceptual and professional skills on the job.	
c)	Comments clearly and in an unambiguous terms on the following attributes of the officer in relation to his performance:	
(i)	Commitment to the tasks assigned	
(ii)	Devotion to duty	
(iii)	Human relations (his conduct with colleagues, superiors and subordinates and capacity to get work done)	
	p it's also	

- (iv) Public relation
- Intellectual honesty, creativity and innovative (v) qualities
- Integrity (vi)
- Please indicate if on any of the item in this d) part the Reporting Officer administered any written or oral warning or counseling and how the officer reacted thereafter

GRADING: OUTSTANDING/VERY GOOD/GOOD/AVERAGE/BELOW AVERAGE (if Below Bench Mark or Outstanding Grading is given, then reason may also be mentioned)

Name in Block Letters	
Designation	
Date	
	Employee Name:
	Employee Code:

Employee Signature:....

Signature of the Reporting Officer.....

PART-V—Remarks of the	Reviewing Officer:
-----------------------	--------------------

- Length of service under the Reviewing
 Officer
- 2. Does the Reviewing Officer fully agree with the remarks of the Reporting Officer recorded in Part-III of the proforma. If he does not agree with any adverse remarks of the Reporting Officer, those remarks should be specifically mentioned for expunction or modification
- 3. If the officer reported upon is a member : of Scheduled Caste/Tribe, please indicate specifically whether the attitude of the Reporting Officer in assessing the performance of the SC/ST Officer has been fair and just.
- 4. Is the officer reported upon specifically: suited for particular job (including his/her role and responsibility as Revenue In charge of the Division? If so the nature of placement should be suggested.
- Aptitude and potentials of the officer: reported upon and suggestion for possible lines of growth and development.

Signature of the Reviewing Officer
Name in Block Letters
Designation
Date

PART-VI-Remarks of Accepting Authority:--

Signature	
Name & Designation	
Date	
	Employee Name:
	Employee Code:

DELHI JAL BOARD: DELHI SARKAR VARUNALAYA PHASE-II, KAROL BAGH <u>NEW DELHI-110005.</u>

CONFIDENTIAL REPORT OF ZONAL REVENUE OFFICERS

	RT-I —Personal Data and Duties & Responsibilities e filled by the Administrative Section concerned)	s: -
1.	Period of Report	
2.	Name of Officer	
3.	Father's/Husband's Name	
4.	Date of Birth	
5.	Date of continuous appointment to the present grade	
6.	Present residential address	
7.	Post held during period of report	
8.	Period of absence from duty on leave, training	g etc.
	during the year	
9.	Academic and professional achiev	ment
	during the year including degree obt	ined,
	books/article published etc. The tr	-
	course attended during the reported year	may
	also be mentioned	
10.	Reporting& ReviewingOfficers during peri	d of report:
	Nam	& Designation
	Reporting Authority	
	Reviewing Authority	
	,	
		Employee Name:
		Employee Code:

PART –II- A Self-Appraisal:- (To be filled by Officer Reported upon)

a) Parameters	Year of Report	One Year Previous	Two year Previous
 Zone Details¹: i) Name of Zone and location 			
ii) Total No. ofstaff posted			
iii) Total No. of sanctioned water Connections			
iv) No. of domestic water connections			
v) No. of Mixed Use water connections			
vi) No. of commercial water connections			
vii) No. of bulk water connections			
viii) Total Quantity of water Billed in (MGD)			
ix) No. of grievances addressed(Total/disposed)			
x) No. of Water Connections added during the period under report			
(In case of more than one Zone add separate sheet)			
> Total Revenue target Assigned			
> Total Revenue collected excluding infrastructure fund.			
> Total arrears of water chargesat the beginning of the Financial Year under the report.			
➤ How much amount realized out of arrears			
> Total target achieved in %			
➤ Reason for not achieving target (if target not achieved)			
> Any major drive started for achieving the target			
> Total No. of camps organized for achieving target.			

Employee Name:
Employee Code:
Employee Signature:

¹In case of more than one Zone add separate sheet

	Total No. of connections disconnected for default/total number of defaulters in the category.			
	i) Government			
	a) Domestic			
	b) Commercial			
	c) Bulk			
	ii) Private –			
	a) Domestic			
	b) Commercial			
>	c) Bulk Total no. of unauthorized connections, at the			
	beginning of the Financial Year.			
	beginning of the Financial Teal.			
>	Total No. of unauthorized connections detected			
	during the period under report.			
	Total No. of cases detected for use of water in			
	Civil Constructions in Financial Year.			
>	No. of Cases where Cost of Construction was			
	imposed and recovered in Financial Year.			
	1			
>	How many unauthorized connection were:-			
	a) Regularized			
	b) Challaned			
	,			
_	c) Disconnected			
>	How many site checkingwere made during the year?			
0	No. of Bulk connection checked out of total bulk			
	connection?			
	No. of Domestic connection checked out of total domestic			
0	connection?			
0	No. of Commercial connection checked out of total commercial connection?			
	commercial connection.			
0	Discrepancies found (No. of cases)			
_			,	_
	Total No. of Pending applications of New Water Conn	ection in the beginn	ing	
	of the Reporting Year.			
	Total No. of applications received for New Water Con	nection in the Repor	rting Year.	
		_		
	No. of New Water connections sanctioned within time	limit in the reportin	g year.	
,	No. of water connections sanctioned after 35 days.			
	Trial No Donation 11 of CN Will C	C		
'	Total No. Pending applications of New Water Connect	tion at the end of the	e reporting year.	
		Emr	olovee Name:	

Employee Name:
Employee Code:
Employee Signature:

➤ No. of Pending mutation applications in the beginning of the Reporting Year.
> Total No. of applications received for mutationin the Reporting Year.
➤ No. of mutations cases done within time limit in the Reporting Year.
➤ No. of mutations done after 15 days of receipt.
> Total No. of Pending cases left for mutation at the end of the Reporting Year.
➤ No. of Pending applications for Disconnection of water connections in the beginning of the Reporting Year.
➤ Total No. of application received for Disconnection of water connections in the Reporting Year.
➤ No. of Disconnection cases done within time limit in the Reporting Year.
➤ No. of delayed cases after 15 days of receipt of application.
➤ Total No. of Pending Cases left for Disconnection of Water connections in the Reporting Year.
Reason for delay, if beyond time limit in

		Round1	Round2	Round 3	Round 4	Round 5	Round 6
<u> </u>	Total no. of Active water connections						
	o Bulk						
	o Domestic						
	o Commercial						
	 Mixed use 						
Е	illing Efficiency						
>	No. of bills generated on actual reading						
	o Bulk						
	o Domestic						
	o Commercial						
	o Mixed Use						
	No. of bills generated on Average/provisional						
	o Bulk						
	o Domestic						
	o Commercial						
	o Mixed Use						
	No. of exceptional billing cases-(Total/Resolved)						
	No. of Gap billing cases–(Total/Resolved)						
	No of unresolved exceptional/Gap cases of						
	previous round carried forwarded						
	No. of Meter Readers who could not complete						
	meter readings.						
	No. of Meter Readers against whom action						
	recommended for not completing the assigned						
	work in time.						

Employee Name:
Employee Code:
Employee Signature:

b)Demand wise Amount /collection for the year	:
c) Collection in Percentage/Efficiency for the year	ear :
d) Number of ACRs reported/ not reported	
e)Number of ACRsreviewed/ not reviewed	
f) Brief description of duties:	
g) Specific task assigned in addition to normal d	uties & responsibilities
Specified task assigned in addition to normal	Actual achievement
duties & responsibilities	
	Employee Name:
	Employee Code:

j) During the period under report, do you believe that you successful completion of an extraordinarily challenging significant benefits to the public and/or reduction in description.(Within 100 words).	task or major systemic improvement (resulting in
f) What are the factors that hindered your performance, if	any?
g) Please indicate specific areas in which you feel the need to	upgrade your skills through training programs:
❖For the current assignment:	
❖For your future career:	
h) Declaration:	
Have you filled your immovable property return, as due? If Yes, please mention date.	
	Employee Name:
	Employee Code:
	Employee Signature:

PART-III (i) Assessment of	Reporting Officer:-
----------------------------	---------------------

a)	Does the Reporting Officer agree with all that is recorded under Part-II by the Officer. If not	:		
	enumerate precisely the extent of disagreement with and reasons therefore? *			
b)	General comment on the results achieved and the quality of performance and application of knowledge, delegated authority and conceptual and professional skills on the job.	:		
c)	Comments clearly and in an unambiguous terms on the following attributes of the officer in relation to his performance:	:		
(i)	Commitment to the tasks assigned	:		
(ii)	Level of Supervising and monitoring regularly the work performance of the staff.	:		
(iii)	Devotion to duty	:		
(iv)	Human relations (his conduct with colleagues, superiors and subordinates and capacity to get work done)	:		
(v)	Public relation	:		
(vi)	Intellectual honesty, reactivity and innovative qualities	:		
(vii)	Integrity	:		
(viii)	Sense of responsibility			
(ix)	Knowledge of Rules / Procedures	:		
(x)	Knowledge of IT Skills/Relevant Subject	:		
(xi)	Leadership Qualities	:		
xii)	Please indicate if on any of the item in this part the Reporting Officer administered any written or oral warning or counseling and how the officer reacted thereafter	:		
	GRADING: OUTSTANDING/VERY GOOD/ (If Below Bench Mark or Outstanding Gradin	GOOD/AVERAGE/BELOW AVERAGE ng is given, then reason may also be mentioned)		
	Signature of the Rep	orting Officer		
	Name& Designation Block Letters			
		Date		
		Employee Name:		
		Employee Code:		

PART-IV—R	emarks of	the Re	viewing	Officer:
-----------	-----------	--------	---------	----------

1.	Length of service under the Reviewing Officer	:
2.	Does the Reviewing Officer fully agree with the remarks of the Reporting Officer recorded in Part-III of the proforma? If he does not agree with any adverse remarks of the Reporting Officer, those remarks should be specifically mentioned for expunction or modification	f 5 8
3.	If the officer reported upon is a member of Scheduled Caste/Tribe, please indicate specifically whether the attitude of the Reporting Officer in assessing the performance of the SC/ST Officer has been fair and just.	
4.	Is the officer reported upon specifically suited for particular job (including his/her role and responsibility as Revenue In charge of the Division? If so the nature of placement should be suggested.	.
5.	Aptitude and potentials of the officer reported upon and suggestion for possible lines of growth and development.	
	Signatur	e of the Reviewing Officer
	Name in	Block Letters
		Designation
		Date
PART-	VI—Remarks of Accepting Authority:	
	Signatur	e
	Name &	Designation
	Date	
		Employee Name:
		Employee Code:
		Employee Signature