**APPLICATION FORM FOR TECHNICAL ASSISTANT / TRAINING ASSISTANT / PROGRAMME ASSISTANT FOR GRANT OF PAY SCALE FROM T–4 TO T-5 GRADE (CATEGORY –II) OF J.N.K.V.V., JABALPUR**

1. Reported period :
2. Name :
3. Date of Birth/ Age :
4. Field of specialization :
5. Basic degree / Diploma and the :

Institution (the degree was obtained from)

1. Date of entry into the JNKVV Services :
2. Present grade and scale of Pay :
3. Duties assigned to the post for which :

the person has been recruited

1. Date of continuous appointment to the :

present grade

1. Any other basic information :

(Besides the above information, the candidate may be required to furnish at the assessment all the information relevant to his / her career before and after entry into the services of JNKVV)

PART – I

*(To be filled in by the Reviewee / candidate)*

Please furnish the following information

1. Educational career

|  |  |  |  |
| --- | --- | --- | --- |
| Degree/ Diploma / Certificate | Class / Grade | University / Board / Institute | Year |
| Master’s degree or equivalent or any higher degree |  |  |  |
| Bachelor’s degree / Diploma |  |  |  |
| Intermediate |  |  |  |
| High School |  |  |  |

1. (a) Subjects of specialization at the :

 highest degree / diploma

(b) Subjects of specialization at the :

 lower degree / diploma

1. Additional qualifications / trainings acquired in India and / or abroad (list of all part-time or short-time trainings, not included in the educational career. Give dates, duties and duration of the course).
2. Employment record of last five years ending on .....................starting with your present post. List in **reverse order** every employment you have had

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of the employing organization | Designation | Salary / Pay Scale | Date of Joining | Date of Leaving | Nature of duties actually performed |
|  |  |  |  |  |  |

1. (a) Honours / awards etc. :

(b) (i) Membership of Professional societies :

 (ii) Offices and Committees assignments :

 held in professional societies

(c) Special invitations (this would :

 refer to specific invitations to

an individual to present a paper

before professionally oriented

meeting or to participate / conduct

a seminar )

 (d) Special assignments (given by Director :

concerned & higher officer) covered

 (list each one giving dates) and briefly

describe the work done

(Enclose copy of order)

 (e) Duration of absence from the :

University service with reason

during the 5 years period (the

number of months may be specified)

1. Is there any other type of work than :

your present job/assignment that you

would rather do in the institute or outside?

If yes please, please indicate.

1. Please give below the productivity

 statement in respect of the work done

 by you during the period under review.

(This is intended to reflect the actual performance by the reviewee during 5 years. Some of the items may not be applicable to the individuals based on the nature of the duties assigned. In such cases he/she may indicate against the items that it is not applicable. For items (a) to (j) please indicate the numbers only

(The items included in the statement are illustrative and not exhaustive)

**Productivity** **Past 5 years**

1. Technical support for scientific work

such as:

* Units of animals/goatary/poultry/ :

fisheries etc. managed

* Area of land managed :
* Number of experiments /demonstrations :

organized

* Maintenance of web site portal :
* Others (like office, accounts etc.) :
1. Training organized / supported and :

teaching work

1. Extension Education work such as:
* Radio/television talk :
* Field trips :
* Exhibitions :
* Farmers / cultivators contacted :
* Others (please specify) :
1. Team –work and cooperation :

mentioning specifically inter-disciplinary,

inter-institutional and intra-institutional

activities in which you were involved

1. Institution building activities such as :
* Membership in special committees /

task force

* Organizing seminar/symposia in the

institute

* Any other (please specify)
1. Unpublished reports, papers etc. (Give number):
2. Published work, if applicable. (Give number)
* Books / monographs :
* Professional papers / articles :
* Popular articles :
* Book reviews :
* Professional communication to journals / :

magazines

* Professional abstracts :
* Technical reports :
* Compilation of reports :
1. Papers presented in Seminar/ :

symposium etc (Give numbers)

1. Participation in professional meetings :

 / workshops etc. (Give numbers)

 (j) Relationship with his professional colleagues:

1. Guidance received :

 (ii) Guidance given :

 (iii) Participation in co-operative :

research programmes

1. Please append a precise resume of the :

work done during the assessment period

ending on .................... with full supporting

evidence, if any.

1. If some or all of your professional work :

remained incomplete or have fallen below

your expectations, please furnish reasons

for that, and suggest improvements , if any

Signature......................

Name............................

 (In Block Letters)

Designation.................

Date.......................

**NOTE: The achievement / activity should not be repeated**

**PART II**

*(To be filled by the Reviewer / Controlling Authority)*

1. Is the information provided by the reviewee correct to the best of your knowledge?
2. Do you generally agree with the assessment provided by the reviewee against items 7, 8 and 9 of Part I of the proforma?

1. Please comment on the reviewee’s.
	1. Amenability to discipline.................................................................
	2. Punctuality.......................................................................................
	3. Integrity..........................................................................................
2. Please give your critical appraisal of the work done by the reviewee with you.
3. Recommendations.

Signature......................

Name............................

 (In Block Letters)

Designation.................

Date.......................

**PART III**

Remarks of the Associate Director Research / Dean of the College (if he /she is not the reviewer)

Signature of the Reviewer....................

Name....................................... ............

(In Block Letters)

 Designation..........................................

Date.......................

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**PART IV**

Recommendations of the concerned Director/ Dean Faculty

Signature of the Reviewer....................

Name....................................... ............

(In Block Letters)

 Designation..........................................

Date.......................