FORM No.6 (See Rule 12)



UNIVERSITY OF COLLEGE: A.C.S. College Shamlarnaga	Y OF COLLEGE: _	A.C.S.	collège	Shamcarnoga	1
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Confidential Assessment and Self-Assessment Reports of Non-Teaching/No-Technical/Technical Employees

Serial No	Year ending 31" March, 2023,	
File No.		
Name: Shri/St./Kumari.:	Bhusavale. N.S.	7
Department of Office (includi	ng Section):	

INSTRUCTIONS

- 1. Report should be submitted annually and for the period ending 31" March,
- 2. Report should be signed in full and dated by the Reporting Officer. His Name and designation should be typed or written legibly below his signature.
- 3. Report should as far as possible be written in manuscript. When the report is typed for good and sufficient reasons a certificate to that effect by the Reporting Officer should be added to the Report.
- 4. If the employees has served under the reporting authority for less than six months, the officer's under whom he has previously served should be consulted and their opinions incorporated in the report indicating how far the replies to the questions are based on personal knowledge and how for on reports of other officers.
- 5. Anything specially meritorious or adverse to the employee should be mentioned, even if no specifically provided for.
- 6. Serve notice will be taken of perfunctory, cryptic and incomplete prejudicial reports.
- 7. All Adverse/ outstanding remarks should be communicated to the employee in writing.
- 8. The reviewing authority has right to ask justification of remarks from the reporting officer.

PERSONAL INFORMATION

(To be filled in by the employee concerned)



Name:-	Maraya	1	Father's N	ame	Sambh	aji	
Surname	Bhusawa	le				0	
	as recorded in the Certificate / Schoo		:0\	.10.	1967		
Place of Birtl	1:- Adar	mpu	TA B	Mi			-
	nd Religion :	•	į.	Village	e/Town/Taluk	a/Distri	ct/State
Tribes /Noma Classes etc. Home Town	ngs to Scheduled dic Tribes/ Other	Back ward					
(With resider	ntial Address). :-	A.	post.	Dup	pa.		
			a Mas)goa	4		
D	11 (T 1)		10814	'W	anded		
Permanent Ad	ldress (Local):-		<u></u>				
Date of Joinin	g University serv	rices and	13.	06.1	992		
Designation at	the time of first	appointme	nt ,	Pean			
Intermediary p	ositions held bet	ween initia	.1				
Appointment a	and present positi	ion if any	Position		Period		from
		(i)	peon				
		(ii)					
		(iii)					
Mother Tongue	:-		marath	<u> </u>	11.2	1	
Language know	vn :-	M	arathi.	Hor	idi	1	
Qualification a	nd degree, :-	<u>/</u>	alst.		1		
University.	:-	Z.P.	Local s	chro	1.		

Confidential Assessment Rep	ort regar	ding ability a	and char	ıcter	\$ 501 * SMOO
Name:- Bhusawa	e re	arayan	Jamb	naji	(and () ()
Period of Report :- Post of Posts held during the		d'		And the second s	veets
Period of report,	. i-	2012	.23.		
Department/Office/Section	1-	046	ce p	eon	
Leave taken during the period E.L./C.L./ Other Leave	;				
PE	RFORM	ANCE ASSE			
Sr. Item No	V. Good A	Good B	Fair C	Average D	Below Average E
I Technical Adequacy 1. Industry 2. Application		. ~			
3. Initiative4. Neatness		Y			
5. Accuracy6. Punctuality in work7. Methodical and systematic working		\checkmark			
8. Promptness in disposal9. Regularity in attendance10. Relations with Superiors					
11. Relations with colleague12. Relations with members of public13. Dependability	S				
14. Capacity to get work donIl General Impression1. General impression	ie	~			
and grasp 2. Leadership qualities 3. Level of knowledge (related to the section/					
department) 4. Tech. ability (where ever relevant) 5. Sp. Complementary					
aptitude qualities etc. other than job requirements.		√ _₩			

Sr. Item No	V. Good A	Good B	Fair C	Average D	Below Average E
II Recommendation a) Administrative ability including judgment, i promptness and drive b) Fitness to continue in present post c) Fitness for promotion d) Any other item not co but which you would to record please specific the aspect e) Recommendation observed in the proporting officers.	nitiative, the vered like fy ervation	yes yes wax is	sah	ntalto	Ľ

Date :- \$ (. 3 . 202)

Signature Superintendent Name and Designation of the Reviewing Officer

Note: Items covered by I, II and III may not be applicable to all categories or employees and in all cases, whose assessment in respect of particular item is not necessary, the Reporting officer should state in the column as NA (not applicable). Assessment has to be done five points scale i.e. Very Good, Good, Fair, Average and Below Average. Place Mark "" in appropriate columns to arrive at final assessment

OBSERVATION OF REVIEWING OFFICE ON THE REPORT (To be filled in by the Reviewing Officer)

- 1. Length of service under Reviewing Officer during the period under report
- 2. Do you agree with the Reporting officer or do you wish to modify or add to his assessment
- 3. Observation of remarks to the employees and clarification from the Reporting officer sought if any.
- 4. Communication of remarks to the employees and clarification from the reporting officer sought, if any

Date: - 31.3.2013

Shri Madhukarrao Bapurao Pal Matgao har College, Shankarna

Name and designation of the New leving officer Neith Dist. Mended. lited ostuded osmehunbelli iniz

(Signature)



FORM No.6 (See Rule 12)

UNIVERSITY OF COLLEGE:	A.C.s. colles	fl shank amagan

Confidential Assessment and Self-Assessment Reports of Non-Teaching/No-Technical/Technical Employees

Serial No	Year ending 31" March, 2023
File No	3
Name: Shri/St./Kumari.: Shri	muly s.y.
Department of Office (including Section):	Lab. Assistant.

INSTRUCTIONS

- 1. Report should be submitted annually and for the period ending 31" March,
- 2. Report should be signed in full and dated by the Reporting Officer. His Name and designation should be typed or written legibly below his signature.
- 3. Report should as far as possible be written in manuscript. When the report is typed for good and sufficient reasons a certificate to that effect by the Reporting Officer should be added to the Report.
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- 5. Anything specially meritorious or adverse to the employee should be mentioned, even if no specifically provided for.
- 6. Serve notice will be taken of perfunctory, cryptic and incomplete prejudicial reports.
- 7. All Adverse/ outstanding remarks should be communicated to the employee in writing.
- 8. The reviewing authority has right to ask justification of remarks from the reporting officer.

PERSONAL INFORMATION

(To be filled in by the employee concerned)



Name:- Shanka	Father's Name
Surname Muly	
Date of Birth as recorded in Book/S.S.C. Certificate / S. Certificate.	n the service School Leaving :- 22-07.1969
Place of Birth :	(aranga), Deglard, Village/Town/Taluka/District/State
	Village/Town/Taluka/District/State
Whether belongs to Schedo Tribes /Nomadic Tribes/ O Classes etc. Home Town	iled Castes/ Scheduled ther Back ward
(With residential Address)	.: At. Dost Navangal
	To Degl nor.
Permanent Address (Local)):-
Date of Joining University	irst appointment Lab Attendenct Applishant
Designation at the time of t	irst appointment Lab Attendenct Astistant
Intermediary positions held	between initial
Appointment and present p	osition if any Position Period from (i) Lab. Assist: 4.7.1998.— till day (ii)
	(iii)
Mother Tongue	:- marathi,
Language known	:- mar nothi, Hindi snotion
Qualification and degree,	:- Bse.
University.	:- BAM·V

Confidential Assessment Report regarding ability a and character mule shangar Period of Report :-Post of Posts held during the Period of report, 2012 23 Department/Office/Section science Leave taken during the period E.L./C.L./ Other Leave PERFORMANCE ASSESSMENT Sr. Item V. Good Good Fair Average Below No A B C D Average E I Technical Adequacy... 1. Industry 2. Application 3. Initiative 4. Neatness 5. Accuracy 6. Punctuality in work 7. Methodical and systematic working 8. Promptness in disposal 9. Regularity in attendance 10. Relations with Superiors 11. Relations with colleagues 12. Relations with members of public 13. Dependability 14. Capacity to get work done Il General Impression 1. General impression and grasp 2. Leadership qualities 3. Level of knowledge (related to the section/ department) 4. Tech. ability (where ever relevant) 5. Sp. Complementary aptitude qualities etc. other than job requirements.

No V. Good A II Recommendation a) Admini	Good B	Fai C		Average D	Below Average
/ Authinictrosi					E
promptness and drive					
Continue to at					
present post c) Fitness 6					
c) Fitness for promotion d) Any other is-					
d) Any other item not covered but which you would like	Yes				
to record please specify					
aspect	V.				
e) Recommendation observed:	Yes				
of the reporting officer	world	21	sort	rafacting	

Date: - 31.3.2028

Signature
Superintendent
Name and Designation of the Reviewing Officer

Note: Items covered by I, II and III may not be applicable to all categories or employees and in all cases, whose assessment in respect of particular item is not necessary, the Reporting officer should state in the column as NA (not applicable). Assessment has to be done five points scale i.e. Very Good, Good, Fair, Average and Below Average. Place Mark "" in appropriate columns to arrive at final assessment

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- 2. Do you agree with the Reporting officer or do you wish to modify or add to his assessment
- 3. Observation of remarks to the employees and clarification from the Reporting officer sought if any.
- 4. Communication of remarks to the employees and clarification from the reporting officer sought, if any

Date: -31-3-2023

(Signature)

Name and designation of the Reviewing officer shri Madhukarrao Bapurao Patil Madhukarrao Bapurao Patil Madgao Mar College, Shankamagar Top Biloli Dist. Manded.