



Dossier No : 1178

National Agricultural Cooperative Marketing Federation of India Ltd.
Nafed House, Sidhartha Enclave, Ashram Chowk, Ring Road,
New Delhi - 110 014

**ANNUAL PERFORMANCE APPRAISAL REPORT OF GENERAL MANAGER / GENERAL MANAGER (F&A) /
MANAGER / MANAGER (F&A) AND EQUIVALENT POST**

Report for the year / period ending : **2020-2021**

PERSONAL DATA

(To be filled in by the Personnel Section)

PART – 1

1. Name of the Employee	N. GURUSAMY
2. Designation	MANAGER/MANAGER (LEGAL)/MANAGER (HR)
3. Date of Birth	10/11/1962
4. Place of posting	HYDERABAD
5. Qualifications	BACHELOR OF COMMERCE, PGDMM
6. Date of joining NAFED	03/02/1984
7. Date of appointment to the present post	01/07/2016
8. Period for which the employee has worked under the Reporting Officer during the year under review *	dd/mm/yyyy dd/mm/yyyy

PART – 2

To be filled in by the officer reported upon
(Please read carefully the instructions before filling the entries)

1. Brief description of duties: *

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2. 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 (Example Annual Action Plan for your Division)

#	Target/Objective/Goals	Acheivements	Remove
No Record Found.			

3. (A) Please state briefly, the shortfalls with reference to the targets/objectives/goals referred to in item 2. Please specify constraints, if any, 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 i.e. 31 st January of the following the calendar year if not, the date of filling the return should be given.

Annual Return Submitted : **No**

Signature of Officer reported upon

Place : HYDERABAD

Name in Block Letters : N. GURUSAMY

Date :

PART – 3

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

(Please read carefully the guidelines before filling the entries)













(A) Assessment of work output (weightage to this Section would be 40%)

	Reporting Authority *	Reviewing Authority (Refer Para 2 of Part 5) *	Initial of Reviewing Authority
i . Accomplishment of planned work/work allotted as per subjects allotted	<input type="text"/>	<input type="text"/>	Chairman
ii . Quality of output	<input type="text"/>	<input type="text"/>	Chairman
iii . Analytical ability	<input type="text"/>	<input type="text"/>	Chairman
iv . Accomplishment of exceptional work unforeseen tasks performed	<input type="text"/>	<input type="text"/>	Chairman
Overall Grading on "Work Output"			

(B) Assessment of Personal Attributes (weightage to this Section would be 30 %)

	Reporting Authority *	Reviewing Authority (Refer Para 2 of Part 5) *	Initial of Reviewing Authority
i . Attitude to work			Chairman
ii . Sense of responsibility			Chairman
iii . Maintenance of Discipline			Chairman
iv . Communication skills			Chairman
v . Leadership qualities			Chairman
vi . Capacity to work in team sprit			Chairman
vii . Capacity to adhere to time-schedule			Chairman
viii . Inter-personal relationship			Chairman
ix . Overall bearing and personality			Chairman
Overall Grading on "Personal Attributes"			

(C) Assessment of Functional Competency (weightage to this Section would be 30%)

	Reporting Authority *	Reviewing Authority (Refer Para 2 of Part 5) *	Initial of Reviewing Authority
i . Knowledge of Rules /Regulations / Procedures in the area of function and ability to apply them correctly			Chairman
ii . Strategic planning ability			Chairman
iii . Decision making ability			Chairman
iv . Coordination ability			Chairman
v . Ability to motivate and develop subordinates			Chairman
vi . initiative			Chairman
Overall Grading on "Functional Competency"			

GENERAL

PART - 4

1. Relations with the public (whatever applicable) (Please comment on the Officer's accessibility to the public and responsiveness to their needs) *

- Outstanding
- Good
- Poor

2. Training

(Please give recommendations for training with a view to further improving the effectiveness and capabilities of the Officer.)

#	Training	Remarks	Remove
No Record Found.			

3. State of health *

- Outstanding
- Good
- Poor

4. Integrity

(Please comment on the integrity of the Officer)

*

- Above Board
- Nothing Definite can be said
- Doubtful
- Beyond Doubt

5. Pen Picture by the Reporting Officer (in about 100 words) on the overall qualities of the officer including area of strengths and lesser strength, extraordinary achievements, significant failures (ref 3(A) & 3(B) of Part -2) and attitude towards weaker sections. *

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

Signature of the Reporting Officer

Name in Block Letters : SANJEEV KUMAR CHADHA

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Designation : M.D.

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During the period of Report :

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Place:

HYDERABAD

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Date :

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PART - 5 - REMARKS OF THE REVIEWING OFFICER

1. Length of service under the Reviewing Officer *

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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 achievements / 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 assessments attributes please record your assessment in the column provided for you in the section and initial your entries)

☐ Yes ☒ No

3. In case of disagreement please specify the reasons. 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 attitudes towards wear sections.

5. Overall numerical grading on the basis of weightage given in Section A, B and C in Part-3 of the Report.

Signature of the Reviewing Officer

Name in Block Letters : Dr. Bijender Singh

Designation : Chairman

During the period of Report :

Place:

HYDERABAD

Date :

REMARKS OF ACCEPTING AUTHORITY

Do you agree with the report of the Reviewing Authority? Please offer your comments on various aspects of performance of the officer. Please record reasons, should you differ with the Grading given by the Reviewing Authority. *

Signature of the Accepting Authority

Name in Block Letters : Dr. Bijender Singh

Designation : Chairman

During the period of Report :

Place:

HYDERABAD

Date :