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| Annual Performance Review | Year | 2011 |

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| **Name of Associate** | Vinay Mahajan | Employee Number | 10322 |
| **Present Position** | Group Head | Since | Jul 2, 2001 |
| **Division** | Pharmaceuticals | Country | India |
| **Business Unit/**  **Department** | Oncology /Development | | |

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| Name of Manager | Vishwanath Iyer |
| Position | Head : Oncology Biometrics, India |

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| Name of Next Level  Manager | Lira Parvez |
| Position | Head: Oncology Development Operations India |

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| Name of Indirect Manager/Key User |  |
| Company |  |
| Position |  |

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| Annual Performance Review | Objectives | Year | 2011 |

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| Associate | Vinay Mahajan | | | Manager | | Mahesh Iyer | | | Department | | |
| Position | Group Head | | | Position | | Head: Oncology Biometrics, India | | | Oncology Development | | |
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| OBJECTIVES | | Evaluation Criteria; Measure-ments/Perf. Standards | Date | | Priority  No. / % | | Self-Appraisal with Rating\* | | | Manager Appraisal with Rating\* | |
| **Advance & individualize the pipeline** | | Ensure appropriate Biometrics support for the following key filings and regulatory approvals (if data supports). The support will ensure high quality and standards that none of the listed filings or approvals will be delayed due to BDM data quality or analyses.  **Ensure CDRR support for:**   * Review and comment VAP, DB specifications, CRF prior to the FPFV (when available) * Review of RAPs: M3, M6 (within 90 days after FPFV), other RAP modules within 6 months of FPFV * Draft RAP M8 within the 2 weeks of the RAP M7 * Provide SR support for the completion of FIR, Dry run and CSRs for the OTM as per plan * Fully support the publications such as IB, ASCO, ASH, SABCS and decision making meetings such as TRTD (Translational Research and Translational Development board), DLT (Decision Leadership Team), and PMB (Portfolio Management Board). * Organize and support the transition of SR activities from OTM to OGD for compounds moving to full development   **Ensure CDRR SPS-DRP support for:**  Key filings:   * INC424 in MF * LBH589 in Hodgkins Lymphoma(EU) * Afinitor in SEGA (submission of Phase III data for full approval) * Afinitor in AML * SOM230 in Cushings disease (US) * SOM230 in Acromegaly * Tasigna in de novo CML (24months)   4 new pivotal trials planned are:   * Initiate pilot mono and combination studies with our PI3K inhibitor compounds (BKM and BEZ), LDE, and MEK in order to prepare for the next wave of registration trials. * LDE and MEK. * PI3K GPT   **Ensure CDRR OTM support for:**  Ensure optimum support from CDRR Hyd for OTM to plan  28 Ongoing trials:  4 NCE FIH (ex-JPN)   * LDK378 (ALK) * AEB071 (PKC) * LGK974 (Porcupine) * LGX818 (BRAF)   2 FIH JPN trials   * BYL719 * MEK162   2 POC declarations   * AUY922 * MEK162   Strengthen OBBI support across all  phases of development # High Priority Projects:   * LDE225, INC280, MEK162 and Pi3K.   # BDM OBBI support for Diagnostic  Co-Development:   * BKM/BEZ (PI3K/PTEN),   Transition 1 compound to full  Development:   * LDE225   Implement combinations of  unapproved targeted drug   * MEK162/RAF265 * MEK162/BEZ235 * BEZ/IGFR Ab (Lilly)   All new trials in OTM as per plan.   * BHQ880 (DKK1) A2203, A2204 * HCD122 (CD40) A2104 * INC280 (MET) X2102, X2201, X2202 * LCL161(IAP) A2104 * MEK162 (MEK) X2101, X2102,   X2103, X2201.  Initiate registration trials; support of new compounds:   * LDE225 * MEK162   **Ensure CDRR TKI FD support for:**  Support ongoing trials as per plan  Support new registration trials:   * Phase III RCC study 2302 * Phase II HCC studies 2208, 2209 * Phase II breast Study 2210 * Phase II Endometrial Study 2211 as per plan | 31-Dec-2011 | | 50 % | | Overall CDRR support for submissions and pipelines:   * Major inputs given on VAP and DB for PI3K studies, DRP for TKI project. * Key contributions in the RAP process for OTM and TKI studies * Deliverables delivered in a timely manner across all the study teams with acceptable quality for CSRs, IB updates and various conferences (internal & external) * Support ADVANCE activities through DRP team (JReview migration, DVC outputs, LSH, etc.) * August2011 onwards overseeing various CP activities as a.i. Group Head. * Involvement in building new FSP relationship within DR programming group with Sristek   CP:  Nov – Dec 2010 Key contributions to the LBH submission on CP studies  August 2011 onwards:   * SOM230B and SOM230C * LBH589X2101 and 2105 CSRs * TKI258A and AMN107C studies * PI3K CP studies   DRP:   * Validation of Patient Profiles for SOM studies. A lot of inputs to improve the quality of overall deliverable. PKC412D2201, ICL670A2209, TKI258A2302 PPs * Data review process in 2nd interim analysis by providing data differences for SOM studies. * Protocol deviations for Femara, EPO, TKI, BKM * Programming for DVC reports   OTM:   * Key contributions to mono and combination studies started on PI3K, POC for MEK on-going. * Contributions on LDE OTM studies for IB updates, CSRs started.   Contributions on priority projects for various deliverables   * Analyses on PI3K studies for IB, ASCO, Internal meetings, CSR completion * Major contributions in PKQT, Liver toxicity analysis for PI3K and AUY projects. * AUY922A studies major contributions to RAP as well as study deliverables * LDE, BHQ, LEE IB updates   OBBI contributions:   * Standard M8 creation, sample codes for analysis datasets and TLFs on-going. * FDG PET cross project imaging analysis * RAF ASCO publication supported * Gene signature analysis on LDE * Special listing of interest created for RAD studies pNET study (2324) * RTPCR analysis for AMN/STI studies to validate the threshold value * In Q4 2011, we would have an opportunity to start working on these combinations studies. In some of the studies, we have already started contributions to VAP, Data Review and Planning   TKI contributions:   * 2102 CSR completed, * 2105 PK analysis completed, * 2107 on-going, * 2202 on-going, * 2201 stage I analysis and stage II analysis completed and other analysis on-going, ASCO analysis, FDA questions, PMB questions * IB update for 13 studies pooled together | 3 | | Vinay has taken on a couple of new roles this past year. This includes TKI FD local CDRR management, and local management of the DRP group.  Vinay’s contribution to the performance of these teams has been very strong.  For OTM, Vinay has continued to drive a scientific mindset among his team. He has enhanced their participation in OBBI activities, at the same time as keeping the standard OTM work going strong.  One aspect for Vinay to enhance is his global visibility and influence with regard to OTM. Vinay silently is able to encourage and motivate his local team to do better, but is not seen to be influencing the global OTM CDRR team to a large extent.  For TKI, Vinay has been able to influence at a global level. There were instances in the past of non-optimal work allocation, doubling and redundancy of work, and Vinay was able to escalate all of this appropriately. Even when some incorrect decisions were made with respect to analyses, Vinay was able to bring in the PS to help clear the concepts.  For DRP, Vinay’s performance in this first half of this year has been excellent. He has been able to onboard the DRP team, and understand their processes enough to start identifying inefficiencies and gaps. Vinay has been able to bring this to the attention of senior leaders in CDRR, and has been pivotal in putting together a task force to streamline DRP processes. He has also been able to give the DRP programmers locally a flavor of SR work, and in a sense increased their motivation by offering them a chance at a different career path. |  |
| **Further strengthen Operational excellence** | | **CDRR SPS-DRP:**  Implement Program Advance as per plan (> 20 OGD & > 4 OTM trials).  Improve the use of standards within across all projects:   * STL (If applicable to DRP), * TFL (If applicable to DRP), * RECIST, * Macros : Lympho, AML, MM * Common DRP & SR code * Clintrial.gov (If applicable to DRP) * Support implementation of new internal CRT tool   Strengthen DRP Role and responsibilities:   * Improve communications across project teams (focus BDM) * Document filing to support audit readiness * Prompt compliance with metrics and status DB updates within assigned timeframes * Support data management cleaning reporting as related to the submission projects required this year * Support SPS or SR regarding standards or project support if required   Strengthen the Hyderabad build strategy and outsourcing for Biometrics to support global operational and functional excellence goals.   * Grow Hyd Biometrics headcount and capabilities working closely with global counterparts to meet 2011 targets and the India 5 year strategic plan & roadmap.   + For CDRR ensure the transitioning of CDRR FSP resources to in house in Hyd.   + Support the CDRR LT charter and 2011 key initiatives through admin and operational team participation from Hyd.   + CDRR supports all phases of development including biomarkers and imaging.   + Contribute to progress and development of the 2015 Hyd strategy and vision through the Steering committee updated quarterly.   + Develop and implement 2011 action plans that address key agreed barriers identified for 2011 and continue to track as needed progress on barriers from 2010.   + Contribute to o-LT meetings and charters.   + Contribute to Communication initiative.   + Support Resource Management Committee.   Strengthen global team activities and seamless integration across Biometrics sites in US, Basel, Tokyo, Paris and Hyderabad.  Support integration of Japan into global BDM teams, with Hyderabad a ‘preferred partner’ in CDRR teams.  Process Improvement   * Support implementation of program ADVANCE to plan (18 OGD & 6OTM trials) ensuring adequately trained resources in CDMS, SCR in DM, DM programming and CDRR. * Complete RAPs, CSR’s early and on time * Improve the use of standards and monitor progress :   -In CDRR (support the standardization plan across legacy NOVDD, non ADVANCE and ADVANCE studies. Hyd participation in the SPS group).   * Further build on the synergy between SR and Data review programming units.   **Quality**  Drive Quality mindset and increase compliance across groups within groups in Hyd.  Implement critical quality metrics for CDRR and Bios.  Ensure compliance of all training in GCPs and SOPs.  Health Authority Inspections: Implement inspection readiness, training and mock inspections/internal compliance checks across all groups.  Quality Compliance and Sustainability Program: Support implementation of key actions relevant to Biometrics.  Expand the training and compliance function in Hyd. Hire, onboard additional resource (CDRR), ensure close partnership with global counterparts to support compliance and quality initiatives.  Ensure BCP is kept up to date, training performed and successfully tested | 31-Dec-2011 | | 25% | | There has not been enough involvement in ADVANCE frame work till now. Hoping to get more opportunities as the year progresses.  Involvement in ADVANCE related activities:   * Support Metrics reports for Jreview   System upgrades:   * Participation in User testing for CT4 to Jreview migration * Creation of standard reports for data checks * Drug Drug Interaction dataset for easy identification of treatment types * ASP Bridge * SAE macro for reconciliation   DRP:   * Improved alignment with SR functions within CDRR and more collaboration of DRP programmers with SR programmers at least within India. * Encouragement to use the analysis datasets developed by SR in Patient Profiles. * Attempt to focus on better quality and stricter adherence to the timelines for deliverables. This may not be possible to due to a variety of reasons   1. Changes in specifications   2. Changes in priority for CTHs and TDMs   3. Untimely response from CTHs and TDMs * A workshop on DR processes to streamline the whole process from it being driven as “IT ticket” system to replicating how SR function works   SR:   * Increased focus on using the standard TLFs across projects within OTM. A lot of comments given across projects in RAP reviews to cut down on number of reports. * Additional analysis e.g. PK QT, Liver toxicity, renal toxicity, etc. to be standardized so that same programs could be used across projects.   Communication initiative:   * Development of CDRR SharePoint site as a part of Communication initiative. * Transfer of training material and meeting agendas from various Lotus Notes databases to SharePoint area. * Ensured open communication with the team members within BDM India and global colleagues. * Timely reviews of the reports/logs to ensure there are no problems related to quality.   Compliance:   * The team has completed the required trainings as per requirement. * I have put a lot of focus on following processes to keep the team audit ready.   Standards:   * Contributions to various DRP and OTM initiatives for standardizing RAPs, programs.   Quality:   * Overall the output quality has been maintained, but there is a scope for improvement. The quality can be improved by paying more attention to detail. Ensuring the RAPs are correctly understood and followed by the associates. This is work in progress all the time. | 2 | | As mentioned above, Vinay’s contribution towards increasing the operational efficiency of SPS-DRP has begun well. This is still work in progress, and Vinay needs to ensure that this is driven to completion.  Vinay contributed significantly to the communication initiative as part of CDRR key initiatives. His efforts in evaluating and implementing sharepoint as a common exchange platform have been well appreciated.  Vinay has also provided strong support to hiring, by interviewing candidates, and being part of drives.  Vinay has taken over the leadership of creating the slides for the steering committee meetings as part of the 2015 road-map. Though this has not gone as well as expected, Vinay’s continued perseverance and diligence in setting up the meetings, and trying to get alignment across functions to keep it moving is acknowledged. Going forward, Vinay should try and be more forceful and influential to ensure that these are done on time.  Vinay continues to focus on quality with his team members. He has been able to detect errors in outputs, and has been passing these on to the team. This should continue to be an area of focus going forward, and Vinay should continue to drive the quality mindset among his team members. |  |
| **People/ org / culture / team** | | **People : Hire, develop, train and retain our people**  Hire to plan for Hyd Biometrics.   * Biometrics to 76 (+25). * Focus on hiring senior staff in CDRR. * Ensure high quality hiring, diversity and compliance to staffing processes.   2011 Global Employee Survey (GES)   * Effective communication and implementation to ensure 90%+ response rate * Create action plans to continue to drive increased engagement * Define metrics and measure improvement vs 2009 survey results   Create an environment where employees have the tools and skills to deliver top performance consistently.  Develop and implement top actions for 2011 from the Oncology Hyderabad “Great Place to Work’ Initiative.  Ensure that all employees have a development plan, do a TMS pulse check to support this goal, including manager’s response >90% compliance.  Support and strengthen the new managerial structure for Biometrics Hyd effective from Jan 2011, fully aligning with global functions and working seamlessly across all sites.  Strengthen and build Hyd leadership pipeline and skills through targeted development, leadership programs, coaching and mentorship.  Succession plans in place for managers and key roles by end year.  Further develop and expand the skills of staff in Biometrics through robust on boarding (all new associates have an on boarding plan), mentoring, training in accordance with the India 2015 strategy and roadmap for Biometrics.  Contribute and strengthen the Hyderabad team through participation in key site programs and initiatives and ensure continued active participation from oncology.  **Retention:**  Retention at 95% of 3.2/2.3/3.3, maintain a low turnover rate among 2.2. Target overall regrettable turnover rate < 10%. | 31-Dec-2011 | | 10% | | Contributions to the Roadmap 2015 and other parts of the overall strategy to grow the group in India.  Strategic discussions about the possibilities of roles in DRP.  Creation of DRP Programmer Profile role along with Anne and Eric.  Creation of a new process which would align DRP responsibilities in much more streamlined manner.  Various points discussed in the team meetings apart from routine project related activities:  - FDA label info on various drugs: in order to understand the link between what we do and how it gets presented at the end.  - RAF ASCO presentation  - Papers on  "44% outlier data”, “how to name drugs”, “Anscombe’s quartet”, “PK QT analysis for BEZ”  - Coaching and mentoring is continuously on for Oncology FD programmers which is more in informal setting.  - Necessary rewards and recognition for associates through various forums (PQS, A&B, Spot awards)  - Coordinating the BRM slide updates for the Oncology group in India, this was only done for a couple of months.  - Murali has started contributing to OBBI, Prasanna is contributing significantly to TKI, Sudarshan, Nirupama have been key members of PI3K program. Shakti is getting more responsibilities within DRP team.  Active contribution to overall growth of Biometrics functions in India.  Sridevi left the group due to personal reasons at the start of year 2011.  Training for interns in the CP/OTM team was managed effectively with Chandu leading the whole effort with inputs. | 2 | | Vinay has been effective in coaching and mentoring his team. He has had a few new hires join the OTM team, and he has been able to onboard them efficiently. These associates now seem completely comfortable in their teams.  Vinay also constantly strives to create an atmosphere where associates can learn and grow. He does this by having interesting discussions in his team meetings about the scientific aspects of the work they do. The recent presentation by Vinay’s team at the staff meeting was another example of how well Vinay is able to coach his team. |  |
| **Meet growth & profitability targets** | | Support Biometrics to contribute in achieving productivity targets within OGD&GMA of $70M in 2011.  Support the global outsourcing strategy for CDRR, including the follow-on strategy/plans and successful completion of the 2 India pilots.  Implement and track Biometrics productivity, KPI Metrics and address improvement areas for teams based in Hyderabad.  Support implementation of effective global teams across sites (US, Basel, Paris,  Hyderabad and Tokyo). | 31-Dec-2011 | | 10% | | Participated in the identification process for choosing the FSP vendors in India.  I do not think any of the KPIs have been implemented.   * Ensured open communication with the team members within BDM India and global colleagues. | 2 | | Vinay has been a strong contributor to identifying new FSP partners. He has also helped to achieve the productivity targets by converting some FSPs to internal hires. |  |
| **People/ org / culture / team** | | **Drive Scientific Excellence:**  CDRR – innovative SAS macros, functions, presentations at SAS conferences  Outside – Scientific Brand building | 31-Dec-2011 | | 5% | | * Active reading of scientific literature and attempts to write some papers by collaborating with others * Participated in exchange forum and presented a paper on PFS in RECIST * Team presentation by OTM team in the OGD&GMA staff meeting * Presented “basics of clinical trials” at the Pharmacy College in Madhapur * Will go and teach at a college in Kerala in the last week of Oct 2011 | 2+ | | This has been an area of outstanding contribution from Vinay in the past 6 months. The work done by Vinay on concordance rates in PFS evaluation has spurred on other associates to continue to look for areas where they could also contribute. Vinay has made presentations in various local forums, including the Biostat conference at Novartis, and teaching at a local pharmacy college.  Vinay’s self focus on continuing to read has also been a source of inspiration for many BDM colleagues, and I am confident that Vinay will be able to contribute greatly towards making the BDM organization a much more scientific focussed group. |  |

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| Objectives discussed and agreed on | | Date | | | | Appraisal discussed and agreed on | | Mid-Year date: | Year-End date: | Overall Rating 2+ |
| Associate |  | | | | | Associate |  | | | 1 🞎 2🞎 3 🞎 |
| Manager |  | | | | | Manager |  | | | 1 🞎 2 🞎 3 🞎 |
| Ind. Manager/  Key User |  | | | | | Ind. Manager/  Key User |  | | | 1 🞎 2 🞎 3 🞎 |
|  | |  |  |  |  | **\* 1 = Partially met expectations 2 = Fully met expectations 3 = Exceeded expectations** | | | | | |

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| Performance Review: Values and Behaviors | Year | 2011 |

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| **Name of Associate** | **Vinay Mahajan** | | | **Name of Manager** | | **Mahesh Iyer** | |
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| **Novartis Values & Behaviors** | | Self-Appraisal with Rating\* Comments (specific examples) | | | Manager Appraisal with Rating\* Comments (specific examples) | | |
| **Result driven** | | 3 | - The team has done a great job in meeting the timelines with good quality. There has not been any instance where there was any delay due to our inability to deliver on time.  - The day to day activities on projects have been managed by associates themselves, which is heading in the right direction with respect to the development of the group.  - There is a lot more awareness on scientific correctness through our greater involvement in submission level activities on TKI, OTM projects. | |  | |  |
| **Customer/Quality Focus** | | 2+ | - Along with me all the associates have taken on themselves to think about the big picture and translating it into better quality and customer focus.  - On DRP patient profiles, we have given a lot of comments to improve the overall quality of the deliverables. In PI3K IB updates, PK QT analysis, Liver toxicity analysis there are instances of appreciation from the clinical teams for maintaining high quality and high level of input. | |  | |  |
| **Innovative and Creative** | | 2+ | - Creative ways implemented while training the team to explain work related aspects.  - Some programs for SAE reconciliation, individual patient data review report with hyperlinks to various CRF pages, program to have resource allocation done semi-automatically – there is a lot of work needs to be done though. | |  | |  |
| **Competent** | | 2 | - With increasing exposure to people management, I have developed ways to manage people.  - I have improved my abilities to answer queries from local teams (on technical as well as on people front) so that minimum support is taken from Global teams. When ever there are questions which are unsolved, there are multiple solutions proposed. | |  | |  |
| **Leadership** | | 2 | - I think I have improved as a leader over the year. I am more comfortable in leading a team and guiding the team as a leader.  . I think I am guiding the team towards the right direction to take on more complex tasks.  - Murali has started contributing to OBBI, Prasanna is contributing significantly to TKI, Sudarshan, Nirupama have been key members of PI3K program. Shakti is getting more responsibilities within DRP team. | |  | |  |
| **Fast/Action-Orientation/Initiative/Simplicity** | | 2 | - There are some questions about how we can improve on the turn around time for some DRP deliverables. We should get some answers through some of the DRP initiatives.  - OBBI related programming activities are on track. | |  | |  |
| **Empowerment/Accountability** | | 2 | - I have kept myself away from day to day activities at each project level. I have given that responsibility to each individual to take necessary decisions with continuous support. In return the team has responded very well.  - I have given my team the required amount of responsibility to handle their project and have made them accountable for the same. | |  | |  |
| **Commitment/Self-discipline** | | 2+ | - I am committed to developing associates further to take on more responsibilities.  - I have been a committed member of the study teams and have contributed to best of my abilities. | |  | |  |
| Mutual Respect/Candor/Trust/Integrity/Loyalty | | 2 | - I have trusted the team to the possible extent. I have been accountable for my own mistakes. | |  | |  |
| **Open Communication/Collaboration/Compassion** | | 2 | - I have communicated timely in a consistent manner. I have been open to the criticism on the shortcomings. | |  | |  |
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| **\* 1 = partially met 2 = fully met 3 = exceeded** | | 2 | **Overall Self Appraisal (Rating)\*** | |  | | **Overall Manager Appraisal (Rating)\*** |

# Novartis Values & Behaviors

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| **Results driven**   * Can be relied upon to exceed targets successfully * Does better than competition * Pushes self & others for results while staying in bounds of ethical and legal standards   **Customer / Quality Focus**   * Assigns highest priority to customer satisfaction * Listens to customer & creates solutions for unmet customer needs * Establishes effective relationships with customers and gains their trust & respect   **Innovative & Creative**   * Comes up with a lot of new & unique ideas * Challenges “status-quo”: does not settle for the first right idea * Makes new connection work by seeing relationships between seemingly disconnected elements, synthesizes odd combinations   **Competent**   * Has functional & technical knowledge & skills to successfully perform his/her role   **Leadership**   * Establishes clear directions and sets stretch objectives * Aligns and energizes associates behind common objectives * Champions the Novartis Values & Behaviors. Rewards/encourages the right behaviors and corrects others   **Fast/Action-oriented/Initiative/Simplicity**   * Is action-oriented & full of energy to face challenging situations * Is decisive, seizes opportunities and ensures fast implementation * Strives for simplicity & clarity. Avoids “bureaucracy” | **Empowerment/Accountability**   * Sets clear performance targets and a well defined "playing-field" with corresponding personal accountability * Defines clear-cut, flexible involvement process (involves the right associates in the right situation at the right time) * Fully utilizes diversity of team-members to achieve superior business success * Shares consequences of results with all involved * Fully cooperates with all organizational compliance initiatives and legal requests, as well as motivates others to behave in a way that ensures adherence to the same   **Commitment/Self-discipline**   * Fully supports and implements decisions * Is 100% committed to achieve agreed-upon targets (strives to achieve the "slightly impossible") * Pursues targets with a need to finish. Does not give up, especially in the face of adversity   **Mutual Respect/Candor/Trust/Integrity/Loyalty**   * Establishes mutual respect and trust in dealing with others * Acts and behaves in accordance with his/her words * Commits to honesty/truth in every facet of behavior and demonstrates ethical and legal conduct * Keeps confidences, admits mistakes & does not misrepresent self for personal gain   **Open Communication/Collaboration/Compassion**   * Communicates in open, clear, complete, timely, and consistent manner * Listens effectively and invites response * Genuinely cares for people & demonstrates empathy * Is a team player |

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| Annual Performance Review - Manager | Year | 2011 |

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| Name: | Mahesh Iyer | Position: | Head : Oncology Biometrics, India |

Overall Performance Evaluation

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| **OBJECTIVES** | **3** Exceeded expectations | Superior Results, Unsatisfactory Behaviors  **3.1** | Superior Results, Good Behaviors  **3.2** | Superior Results, Superior Behaviors  **3.3** |
| **2** Fully met expectations | Good Results, Unsatisfactory Behaviors  **2.1** | Good Results, Good Behaviors  **2.2** | Good Results, Superior Behaviors  **2.3** |
| **1** Partially met expectations | Unsatisfactory Results, Unsatisfactory Behaviors  **1.1** | Unsatisfactory Results, Good Behaviors  **1.2** | Unsatisfactory Results, Superior Behaviors  **1.3** |
|  | **1** Partially met expectations | **2** Fully met expectations | **3** Exceeded expectations |
| **Novartis Values & Behaviors** | | | | |

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| **Performance Summary** | | | |
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| Key Strengths (current and future assignments) | | | |
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| Key Developmental Needs (current and future assignments) | | | |
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| Associates Comments | | | |
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| **Date** |  | **Signed Associate\*** |  |
| **Date** |  | **Signed Manager** |  |
| **Date** |  | **Signed Next Level Manager** |  |

**\* Signature by Associate does not necessarily indicate agreement, only review and notification.**

**If need be, use a blank sheet of paper for additional comments on the appraisal.**

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| Annual Performance Review - Indirect Manager/Key User | Year | 2011 |

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| Name: | Lira Parvez | Position: | Head: Oncology Development Operations India |

Recommended Performance Evaluation

**OBJECTIVES**

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|  | **3** Exceeded expectations | Superior Results, Unsatisfactory Behaviors  **3.1** | Superior Results, Good Behaviors  **3.2** | Superior Results, Superior Behaviors  **3.3** |
| **2** Fully met expectations | Good Results, Unsatisfactory Behaviors  **2.1** | √Good Results, Good Behaviors  **2.2** | Good Results, Superior Behaviors  **2.3** |
| **1** Partially met expectations | Unsatisfactory Results, Unsatisfactory Behaviors  **1.1** | Unsatisfactory Results, Good Behaviors  **1.2** | Unsatisfactory Results, Superior Behaviors  **1.3** |
|  | **1** Partially met expectations | **2** Fully met expectations | **3** Exceeded expectations |
| **Novartis Values & Behaviors** | | | | |

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| **Comments** |
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| **Date** |  | **Indirect Manager/Key User** |  |

If need be, use a blank sheet of paper for additional comments on the appraisal