HR Orbit Data Fields

Submitted by: Faiyaz Masrur

Approved by: Liton Kumar Das

Signature:

Employee Login

Username: Enter Email *

Password: Enter Password *

Submit

Forgot Password

User Email: Enter Email *

Submit

Forgot Password Form

New Password: Enter Password *

Confirm Password: Re-enter Password *

Submit

Change Password

Old Password: Enter Old Password *

New Password: Enter New Password *

Confirm Password: | Re-enter New Password |

Submit

Create Employee

Employee Email:	Enter	· Email	*
Employee Id:	Ent	er Id	*
Employee Name:	Enter U	sername	*
Designation:	Select	-	*
Department:	Select	-	*
Joining Date:	DD/MM/	YYYY # *	
Grade:	Options	Choose	*
Basic Salary:	28000	*	
Reporting Manager:	Options	Choose	*
Set Password:	Enter P	assword	k
is_manager:	0		
is_hr:	0		
is_hod:	0		
is_coo:	0		
is_ceo:	0		
Reviewed by Reporting Manager:			
Reviewed by HR:	0		
Reviewed by HOD:	0		
Reviewed by COO:	0		
Reviewed by CEO:	0		
Edit	Submit		

Employee Profile

Employee Email: shovon.chowdhury@sonali.com Employee Id: IT01 Employee Name: **Shovon Chowdhury** Designation: Manager Department: IT Joining Date: 01-07-2024 Grade: T001 Reporting Manager: Md Solaiman Hossain Responsibilities: Enter Responsibilities Previous Work Experience: Start End Organization Designation (Optional) (+)[Note: To add another experience] [Note: To trigger Auto Calculation] Save Total Work Experience: 1.2 year [Note: Auto calculate] Educational Qualification: Choose File No file chosen* Institution Year Degree [Note: To add another qualification] Professional Certificate: Name of Certification Institution (Optional) [Note: month, year] Credential Id Issue Date Choose File No file chosen * [Note: To add another certificate] (Signature with *Black and White Choose File No file chosen **Upload Signature:** *No Background) Choose File No file chosen Upload Image: Submit Edit

Performance Appraisal Form for Employee

IT01

July 01, 2024 to July 01, 2025

Review Period:

Employee Id:

Employee Name:	Shovon Chowdhury	
Designation:	Manager	
Department:	IT	
Joining Date:	01-07-2024	
Grade:	T001	
ACHIEVEMENTS	G/GOAL COMPLETION *	[Note: Field limit 1000 words
ou are encouraged to add your points on your goals (if any).	our achievements for this appraisal year. Inclu	ding previous
TRAINING & I	DEVELOPMENT PLAN *	[Note: Field limit 1000 words
What do you consider to be the aspects of y	rour performance that needs to be improved?	
What further training and/or e future performance and develo	experience do you feel would help opment? *	your
☑ SOFT SKILLS TRAINII	NG	i
☑ TECHN	ICAL TRAINING	[Note: Field limit 500 words]
Please Specify (if any):		
	Submit	

Performance Appraisal Form for Employee - Reporting Manager Review

ACHIEVEMENTS/GOAL	COMPLETION *	[Note: Field limit 1000 words]
Make any comment that you feel necessary to clarify or above. In addition set goals for next year.	supplement the Achievements me	ntioned
Reporting managers remarks for Training and Develop	ment Plan:	
OVERALL ASSES	SSMENT	
How are you going to rate an employee's meeting or exceeding performance expereflects the employee's level of performa	ctations? Select the option	
Does not meet expectation	O Partially meets expect	tation
O Meets expectation	O Meets most expectation	on
O Exceeds Expect	ation [Note: Field limit 1000 words]
Provide comments to justify your rating. When crafting consistent demonstrations of skills, competencies, and organization.		
How are you going to rate an employee's meeting or exceeding performance expereflects the employee's level of performa	ctations? Select the option	
Low Potential - improvement not expect	ted, lack of ability and/or motiv	ation.
O Medium potential - room for some adva	ancement in terms of performa	nce or expertise.
O High potential - performing well and re	eady for promotion immediately	y. [Note: Field limit 500 words]
Remarks on your decision:		

Submit

Performance Appraisal Form for Employee - HR Review

[Note: Field limit 1000 words]

	Remarks from Hur Please validate thi	nan Resource s review and complemer	nt any necessary co	mment		
L	EAVE OBTAINE	ED AS AT: 0 🗘 C	Casual * 0 🛧	Sick* 0	Earned	k
			Save	[Note: To trigger	Auto Calculatior	1]
	Т	otal Leave taken:	0 [Note	: Auto calculate]		
	Att	tendance Percenta	age: 0% *			%, Good=81-90%, rage=Less than 70%
			Save [Note	: To trigger Auto Ca	alculation]	
	o Very	Good OGood C	Average ⊚ Be	elow Average	! [Note: Au	to calculate]
	Va	riance of Salary f	for Decision M	aking: *	_	ss, New Gross, Gros
Prese Basic *	nt Salary	Status	Proposi New Basic	ed Salary New Gross	Gross Diffe	rence
0	Gross	Promotion with Increment	Enter Salary	1	0	J
0	0	Promotion without Increment	Enter Salary	7 0	0)
0	0	Increment	Enter Salary	(0	0)
0	0	Pay Progression	Enter Salary	/ 0	0]
		Save	[Note: To trigge	er Auto Calculation]		
	Decision		Yes/No *	Re	marks *	
P	Promotion Recommo	ended with Increment	☐ Yes ☐ No			
	Promotion Recom	nmended with PP only	☐ Yes ☐ No			
		ed without Promotion	☐ Yes ☐ No			
•		n (PP) Recommended	☐ Yes ☐ No			
	Promotion/Ir	crement/PP Deferred	☐ Yes ☐ No			
Г						
	Remarks on your de	cision:			1 [1	Note: Field limit 500
L						words]
			_			
		Subm	nit			

Performance Appraisal Form for Employee - HOD Review

Decision	Yes/No*	Rema	nrks *	
Promotion Recommended with Increment	☐ Yes ☐ No			
Promotion Recommended with PP only	☐ Yes ☐ No			
Increment Recommended without Promotion	☐ Yes ☐ No			
Only Pay Progression (PP) Recommended	☐ Yes ☐ No			
Promotion/Increment/PP Deferred	☐ Yes ☐ No			
Remarks on your decision:			[Note:	Field
Tremains on your decision.			[rioto.	word
	and Form for	Employee		
Performance Apprais		Employee	[Note: Field limit	1000
Performance Apprais	sal Form for Review		[Note: Field limit	1000
Performance Apprais - COO Please confirm your agreement to this review and	sal Form for Review	ou feel necessary:		1000
Performance Apprais - COO	Sal Form for Review d add any comment you	ou feel necessary:	[Note: Field limit	1000
Performance Apprais - COO Please confirm your agreement to this review and	sal Form for Review	ou feel necessary:		1000
Performance Apprais - COO Please confirm your agreement to this review and Decision Promotion Recommended with Increment	Yes/No *	ou feel necessary:		1000
Performance Apprais - COO Please confirm your agreement to this review and Decision Promotion Recommended with Increment Promotion Recommended with PP only	Yes/No * Yes \(\text{No} \) Yes \(\text{No} \)	ou feel necessary:		1000
Performance Apprais - COO Please confirm your agreement to this review and Decision Promotion Recommended with Increment Promotion Recommended with PP only Increment Recommended without Promotion	Yes/No *	ou feel necessary:		1000

Submit

Performance Appraisal Form for Employee - CEO Review & Approval

Please confirm your agreement to this review and add any comment you feel necessary:

[Note: Field limit 1000 words]

Decision	Yes/No *	Remarks *
Promotion Recommended with Increment	☐ Yes ☐ No	
Promotion Recommended with PP only	☐ Yes ☐ No	
Increment Recommended without Promotion	☐ Yes ☐ No	
Only Pay Progression (PP) Recommended	☐ Yes ☐ No	
Promotion/Increment/PP Deferred	☐ Yes ☐ No	
Remarks on your decision:		[Note: Fie