Annual Performance Appraisal Report for Office Attendant

	For the Teal/Teriod Ending
l.	Name in Full:
2.	Date of Birth:
3.	Date of continuous appointment to the present post:
4.	Educational & Technical Qualifications:
5.	Observations on:
	i) Intelligence:
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	ii) Energy and reliability:
	iii) Punctuality in attendance:
	iv) Behaviour: Does he show proper courtesy and good manners towards collegues towards Guests/Outsiders:
	v) Amenability to discipline:
	vi) Knowledge and ability to operate office auto-machine:
	a. Telephone
	b. Fax
	c. Photocopy (Xerox)

d. Computer

e. Others

6.	Has he been responsible for any outstand work during the period Under review meriting special commendation? If so what?
7.	Assessment of integrity (If anything adverse has come to your notice please specify it also):
8.	General remarks:
	Signature of the Reporting Officer:
	Digital
	Name in Block Letters:
	Name in Block Letters: Designation:
	Designation:
	Designation: Date:
	Designation: Date: Remarks of the Reviewing Officer
	Designation: Date: Remarks of the Reviewing Officer Signature of the Reviewing Officer
	Designation: Date: Remarks of the Reviewing Officer Signature of the Reviewing Officer Name in Block Letters: