

राजपत्रित अधिकारियों के कार्य की गोपनीय रिपोर्ट का फार्म

रिपोर्ट का काल/समय	
अधिकारी का नाम	
पद	
रिपोर्ट लिखने वाले अधिकारी व रिव्यू करने वाले प्राधिकारियों का नाम	
रिपोर्ट लिखने व रिव्यू करने वाले प्राधिकारियों को निम्नलिखित बिन्दुओं पर विशेष तौर पर अपना मत देना चाहिए।	
1-क्या अधिकारी योग्य, बुद्धिमान, ईमानदार और परिश्रमी है या नहीं और इन दिशाओं में इनकी योग्यता	
2- वह अपने अधीनस्थ से काम का पर्यवेक्ष्य करने में समर्थ है या नहीं और क्या उनके सम्बन्ध सन्तोषजनक हैं?	
3- क्या वह समयनिष्ठ है और अनुशासन बनाये हुय है ?	
4- ईमानदारी के लिये उनकी प्रसिद्धि	
5- क्या उसने कार्यालय के प्रति अपने कर्तव्यों का संतोषजनक ढंग से पालन किया है ।	
6- अधिकारी कार्यालय बन्द होने के बाद और छुट्टियों में मुख्यालय में उपस्थित रहता है अथवा नहीं ।	
7- विशेष अभिरूचि	
8- दोष, अगर कोई हो	
9- वर्गीकरण (प्रकृष्ट, बहुत अच्छा, अच्छा, औसत और औसत से कम)	
10- Whether the officer delivers the services or dispose of the case in a given time frame ? (Reply in 'Yes' or 'No')	

रिपोर्ट लिखने वाले अधिकारी के हस्ताक्षर  
तथा मोहर

**GOVERNMENT OF HARYANA  
FORM OF 'ANNUAL CONFIDENTIAL REPORT'  
(For Clerks and other posts of similar nature in Group 'C')**

**Department of Economic & Statistical Analysis Haryana, Panchkula**

Office/Branch/Section : \_\_\_\_\_

Period under Report : \_\_\_\_\_

**Part-I**

1. Name of the employee : \_\_\_\_\_
2. Father's Name : \_\_\_\_\_
3. Designation of the post held : \_\_\_\_\_

Reporting Authority _____	Reviewing Authority _____	Accepting Authority _____
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**Part-II**

- Important Notes :
1. Before writing the Annual Confidential Report, the Reporting/Reviewing/ Accepting Authorities should read carefully the instructions given in the end of the form
  2. Unless otherwise specified to the contrary, the Reporting Authority should make use of one of the gradings, i.e. 'Outstanding', 'Very Good', 'Good', 'Average', 'Below Average' in the box-blocks provided against each column.

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- |    |  |           |
|----|--|-----------|
| 1. | Brief of duties assigned                                 | _____     |
| 2. | State of Health  | _____     |
| 3. | Conduct and Character                                    | _____     |
| 4. | Punctuality and Regularity in attendance                 | _____     |
| 5. | Ability to get along and behavior with                   | _____     |
|    | (a) Superior Officers                                    | (a) _____ |
|    | (b) Colleagues   | (b) _____ |
|    | (c) Public   | (c) _____ |
| 6. | Amenability to Discipline                                | _____     |
| 7. | Devotion to duty and hardworking                         | _____     |
| 8. | General Intelligence and keenness to learn               | _____     |
| 9. | Knowledge about Department , Branch and Office procedure | _____     |

Name & Designation of the official \_\_\_\_\_

- 10. Proficiency in use of State Language 'Hindi' in his day to day official work. \_\_\_\_\_
- 11. Whether the employee stays at his Headquarters after closing of office and during holidays ? \_\_\_\_\_
- 12. Proficiency and accuracy in typing \_\_\_\_\_
- 13. Proficiency in work of maintenance Of Registers, Files and other record \_\_\_\_\_
- 14. Initiative and willingness o perform Any job of responsibility \_\_\_\_\_
- 15. Assessment of Integrity:  
Has any things come to your notice which Reflect adversely on the official's integrity or his ability to honestly execute his duties? Reply in 'Yes' or 'No'  
\_\_\_\_\_  
If yes please give details.
- 16. Whether there are any 'adverse remarks on the work and conduct of the employee? Reply in 'Yes' or 'No'  
\_\_\_\_\_  
If yes please give details.
- 17. Has the official done any outstanding or notable work meriting? Reply in 'Yes' or 'No'  
\_\_\_\_\_  
If yes please give details.
- 18. Suitability for promotion or Higher Scale of pay \_\_\_\_\_
- 19. "Whether the officer/official delivers the services or dispose of the case in a given time frame ? (Reply in 'Yes' or 'No') \_\_\_\_\_
- 20. Overall Grading based on the Assessment made from Sr.No. 2 to 13 \_\_\_\_\_

Signature of the Reporting Authority  
Name in block letters : \_\_\_\_\_  
Designation : \_\_\_\_\_  
Date :

**REMARKS OF THE REVIEWING AUTHORITY**

(Tick one of these three items (a), (b) & (c) and strike out the remaining two).

- (a) I endorse the above remarks.
  - (b) I generally agree with the above views subject to the following observations.  
\_\_\_\_\_
  - (c) I do not agree with the above remarks in column : \_\_\_\_\_
- Signature of the Reviewing Authority  
Name in block letters : \_\_\_\_\_  
Designation : \_\_\_\_\_  
Date :

**Remarks, if any, or countersignatures of the Accepting Authority.**

Signature of the Accepting Authority  
Name in block letters : \_\_\_\_\_  
Designation : \_\_\_\_\_  
Date :

**IMPORTANT INSTRUCTIONS FOR FILLING IN THE FORM**

1. The following prescribed time Schedule for writing Annual Confidential Report may strictly be adhered to:
  - (a) The Reporting Authority must write the report before 15<sup>th</sup> April;
  - (b) The Reviewing Authority must record its comments before 30<sup>th</sup> April; and
  - (c) The Accepting Authority must record its acceptance before 15<sup>th</sup> May.
2. The Reporting Authority should use the prescribed terminology for each item and write one of the choice in the box-block mentioned against these items.
3. The Reporting Officer should record 'adverse remarks' if any, in column at Sr. No. 17 and nothing be written alongwith the box-block meant for Grading only.
4. While recording remarks 'Integrity' in column at Sr. No. 16, instructions contained in para 4, of Consolidating instructions on confidential reports, read with instructions No. 61-20-85-S(I), dated 12.12.85 must be gone through carefully.
5. The Reporting Officer should make a mention of any defects noted and any punishment inflicted on the employee or written warning(s) issued to him during the period under report to give any correct picture of his work and conduct.
6. The Report should be a true and objective assessment of the employee's ability and character as reflected in his day to day official work during the period under report.
7. Signatures in full alongwith date be put up by the Reporting/Reviewing/Accepting Authorities.

**GOVERNMENT OF HARYANA**  
**FORM OF 'ANNUAL CONFIDENTIAL REPORT' OF DRIVERS**  
(Application for Drivers of staff Cars/Jeeps and other official vehicles)

**Department of Economic & Statistical Analysis Haryana, Panchkula**

Office of the \_\_\_\_\_

Period of Report \_\_\_\_\_

**PART-I**

1. Name of the employee \_\_\_\_\_

2. Father's Name \_\_\_\_\_

3. Date of continuous appointment  
on the post of Driver. \_\_\_\_\_

Reporting Authority \_\_\_\_\_      Reviewing Authority \_\_\_\_\_      Accepting Authority \_\_\_\_\_

**PART-III**

Important Notes:-

1. Before writing the Annual Confidential Report, the Reporting/Reviewing/Accepting Authorities should read carefully the instructions given at page 2 of this form.
2. Unless otherwise specified to the contrary the Reporting Authority should make use of one of the grading i.e. 'outstanding', 'Very good', 'Good', 'Average', 'Below Average' in the Box-Blocks provided against each column.

1. State of Health \_\_\_\_\_

2. Punctuality and Devotion to duty \_\_\_\_\_

3. Ability to get along and behaviour with  
i) Superior Officers \_\_\_\_\_ i)  
ii) Colleagues \_\_\_\_\_ ii)

4. Whether the employee stays at his head-quarter after closing of office and during holidays (Reply in 'Yes' of 'No'). \_\_\_\_\_

5. Technical Knowledge about the vehicle which he drives. \_\_\_\_\_

6. Proficiency in safe driving and maintenance of the vehicle. \_\_\_\_\_

7. Acquittance with traffic rules and other road signs. \_\_\_\_\_

Name & Designation of the official\_\_\_\_\_

8. Does he maintain the log book according to Govt. instructions ? \_\_\_\_\_  
(Reply in 'Yes' or 'No' ).
9. Assessment of Integrity: \_\_\_\_\_  
Has anything come to your notice which reflect adversely on the official's integrity. Reply in 'Y es' or 'No'. If Yes, please give details.
10. Any other comments. \_\_\_\_\_
11. “Whether the officer/official delivers the services or dispose of the case in a given time frame ? (Reply in ‘Yes’ or ‘No’)
12. Overall grading based on the assessment made from Sr.No.2 to 10. \_\_\_\_\_

Signature of the Reporting Authority

Name in block letters\_\_\_\_\_

Designation\_\_\_\_\_

Date \_\_\_\_\_

**REMARKS OF THE REVIEWING AUTHORITY**

Signature of the Reporting Authority

Name in block letters\_\_\_\_\_

Designation\_\_\_\_\_

Date \_\_\_\_\_

**GOVERNMENT OF HARYANA**

**FORM OF 'ANNUAL CONFIDENTIAL REPORT'  
(For the Common Cadre Group 'D' posts)**

**Department of Economic & Statistical Analysis Haryana, Panchkula**

Office/Branch/Section : \_\_\_\_\_

Period under Report : \_\_\_\_\_

**Part-I**

1. Name of the employee : \_\_\_\_\_
2. Father's Name : \_\_\_\_\_
3. Designation of the post held : \_\_\_\_\_

Reporting Authority _____	Reviewing Authority _____	Accepting Authority _____
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**Part-II**

- Important Notes :
1. Before writing the Annual Confidential Report, the Reporting/Reviewing/Accepting Authorities should read carefully the instructions given in the end of this form
  2. Unless otherwise specified to the contrary, the Reporting Authority should make use of one of the gradings, i.e. 'Outstanding', 'Very Good', 'Good', 'Average', 'Below Average' in the box-blocks provided against each column.

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1. State of Health \_\_\_\_\_
2. Conduct and Character \_\_\_\_\_
3. Punctuality and Regularity in attendance \_\_\_\_\_
4. Amenability to Discipline \_\_\_\_\_
5. Devotion to duty and hardworking \_\_\_\_\_
6. Behaviour & Obedience \_\_\_\_\_  
(a) Attitude of the Officer/ Official towards other castes and Communities. \_\_\_\_\_
7. Intelligence and fitness to do the assigned tasks. \_\_\_\_\_
8. Whether employee stays at his Head-Quarters after closing of office and during holidays? Reply in 'Yes' or 'No' \_\_\_\_\_
9. Assessment of Integrity : \_\_\_\_\_
10. Adverse remarks on work performance and conduct, if nay. Reply in 'Yes' or 'No' \_\_\_\_\_

Name & Designation of the official \_\_\_\_\_

11. Suitability for promotion or Higher scale of pay (use term 'Fit' or "Not yet Fit' or 'Not Fit') \_\_\_\_\_
12. "Whether the officer/official delivers the services or dispose of the case in a given time frame ? (Reply in 'Yes' or 'No') \_\_\_\_\_
13. Overall Grading based on the assessment made from Sr.No. 2 to 10 above. \_\_\_\_\_

Signature of the Reporting Authority

Name in block letters : \_\_\_\_\_

Designation : \_\_\_\_\_

Date : \_\_\_\_\_

**REMARKS, IF ANY, OR COUNTERSIGNATURES OF THE REVIEWING/ACCEPTING AUTHORITY**

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Signature of the Reviewing /Accepting Authority

Name in block letters : \_\_\_\_\_

Designation : \_\_\_\_\_

Date : \_\_\_\_\_

**IMPORTANT INSTRUCTIONS FOR FILLING IN THE FORM**

1. The following prescribed time Schedule for writing Annual Confidential Report may strictly be adhered to:
  - (a) The Reporting Authority must write the report before 15<sup>th</sup> April;
  - (b) The Reviewing Authority must record its comments before 30<sup>th</sup> April; and
  - (c) The Accepting Authority must record its acceptance before 15<sup>th</sup> May.
2. The Reporting Authority should use the prescribed terminology for each item and write one of the choices in the box-block mentioned against these items.
3. The Reporting Officer should record 'Adverse Remarks' if any, in column at Sr. No. 17 and nothing be written alongwith the box-block meant for Grading only.
4. While recording remarks on 'Integrity' in column at Sr.No. 9, instructions contained in para 4, of 'Consolidated' instructions on confidential reports, read with instructions No. 61/20/85-S(I) dated 12.12.85, must be gone through carefully.
5. The Reporting Officer should make a mention of any defects noted and any punishments inflicted on the employee or written warning(s) issued to him during the period under report to give a correct picture of his work and conduct.
6. The Report should be a true and objective assessment of the employee's ability and character as reflected in his day to day official work during the period under Repot.
7. Signatures in full alongwith date be put up by the Reporting/Reviewing/Accepting Authorities.



**GOVERNMENT OF HARYANA**

**FORM OF 'ANNUAL CONFIDENTIAL REPORT'  
(For Assistants and other posts of similar nature in Group 'C')**

**Department of Economic and Statistical Analysis, Haryana**

Office/Branch/Section : \_\_\_\_\_

Period under Report : \_\_\_\_\_

**Part-I**

1. Name of the employee : \_\_\_\_\_
2. Father's Name : \_\_\_\_\_
3. Designation of the post held : \_\_\_\_\_

Reporting Authority _____	Reviewing Authority _____	Accepting Authority _____
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**Part-II**

- Important Notes :
1. Before writing the Annual Confidential Report, the Reporting/Reviewing/ Accepting Authorities should read carefully the instructions given in the end of the form
  2. Unless otherwise specified to the contrary, the Reporting Authority should make use of one of the gradings, i.e. 'Outstanding', 'Very Good', 'Good', 'Average', 'Below Average' in the box-blocks provided against each column.

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- |    |   |           |
|----|---|-----------|
| 1. | Brief of duties assigned                                | _____     |
| 2. | State of Health   | _____     |
| 3. | Conduct and Character                                   | _____     |
| 4. | Punctuality and Regularity in attendance                | _____     |
| 5. | Ability to get along and behaviour with                 | _____     |
|    | (a) Superior Officers                                   | (a) _____ |
|    | (b) Colleagues  | (b) _____ |
|    | (c) Public  | (c) _____ |
| 6. | Amenability to Discipline                               | _____     |
| 7. | Devotion to duty and hardworking                        | _____     |
| 8. | General Intelligence and keenness to learn              | _____     |
| 9. | Knowledge about Department, Branch and Office procedure | _____     |

Name & Designation of the official \_\_\_\_\_

10. Proficiency in use of State Language 'Hindi' in his day to day official work. \_\_\_\_\_
11. Whether the employee stays at his Headquarters after closing of office and during holidays ? Reply in 'Yes' or 'No'. \_\_\_\_\_
12. Promptness and Accuracy in disposal of work \_\_\_\_\_
13. Knowledge of Rules, Regulations and Instructions in general and with particular reference to the work allotted to him. \_\_\_\_\_
14. Quality of work  
(Delete the sub-clause(s) which is/are not related to his work).
- (a) Ability to apply the relevant Rules and Regulations correctly (a) \_\_\_\_\_
  - (b) Capacity for examining cases thoroughly and comprehensiveness (b) \_\_\_\_\_
  - (c) Quality of Noting & Drafting (c) \_\_\_\_\_
  - (d) Proficiency in case handling (d) \_\_\_\_\_
  - (e) Proficiency in Store Management (e) \_\_\_\_\_
  - (f) Proficiency in Accounts Matters (f) \_\_\_\_\_
15. Organisation of work :
- (a) Retrieval of papers/information references (a) \_\_\_\_\_
  - (b) Keeping the work place tidy and the record systematic (b) \_\_\_\_\_
16. Assessment of Integrity :  
Has anything come to your notice which reflect adversely on the official's integrity or his ability to honestly execute his duties ?  
Reply in 'Yes' or 'No'.  
If 'Yes', please give details. \_\_\_\_\_
17. Whether there are any 'adverse remarks' on the work and conduct of the employee ?  
Reply in 'Yes' or 'No'.  
If 'Yes', please give details. \_\_\_\_\_
18. Has the official done any outstanding or notable work meriting ?  
Reply in 'Yes' or 'No'.  
If 'Yes', please give details. \_\_\_\_\_
19. Suitability for promotion or Higher scale of pay (use term 'Fit' or "Not yet Fit' or 'Not Fit') \_\_\_\_\_

Name & Designation of the official \_\_\_\_\_

20. “Whether the officer/official delivers the services or dispose of the case in a given time frame ? (Reply in ‘Yes’ or ‘No’) \_\_\_\_\_

21. Overall Grading based on the assessment made from Sr.No. 2 to 18 above. \_\_\_\_\_

Signature of the Reporting Authority  
Name in block letters : \_\_\_\_\_  
Designation : \_\_\_\_\_  
Date :

**REMARKS OF THE REVIEWING AUTHORITY**

(Tick one of these three items (a), (b) & (c) and strike out the remaining two).

- (a) I endorse the above remarks.
- (b) I generally agree with the above views subject to the following observations.  
\_\_\_\_\_
- (c) I do not agree with the above remarks in column : \_\_\_\_\_

Signature of the Reviewing Authority  
Name in block letters : \_\_\_\_\_  
Designation : \_\_\_\_\_  
Date :

**Remarks, if any, or countersignatures of the Accepting Authority.**

Signature of the Accepting Authority  
Name in block letters : \_\_\_\_\_  
Designation : \_\_\_\_\_  
Date :

**IMPORTANT INSTRUCTIONS FOR FILLING IN THE FORM**

1. The following prescribed time Schedule for writing Annual Confidential Report may strictly be adhered to:
  - (d) The Reporting Authority must write the report before 15<sup>th</sup> April;
  - (e) The Reviewing Authority must record its comments before 30<sup>th</sup> April; and
  - (f) The Accepting Authority must record its acceptance before 15<sup>th</sup> May.
2. The Reporting Authority should use the prescribed terminology for each item and write one of the choice in the box-block mentioned against these items.
3. The Reporting Officer should record ‘adverse remarks’ if any, in column at Sr. No. 17 and nothing be written alongwith the box-block meant for Grading only.
4. While recording remarks ‘Integrity’ in column at Sr. No. 16, instructions contained in para 4, of Consolidating instructions on confidential reports, read with instructions No. 61-20-85-S(I), dated 12.12.85 must be gone through carefully.
5. The Reporting Officer should make a mention of any defects noted and any punishment inflicted on the employee or written warning(s) issued to him during the period under report to give any correct picture of his work and conduct.
6. The Report should be a true and objective assessment of the employee’s ability and character as reflected in his day to day official work during the period under report.
7. Signatures in full alongwith date be put up by the Reporting/Reviewing/Accepting Authorities.

**GOVERNMENT OF HARYANA**

**FORM OF 'ANNUAL CONFIDENTIAL REPORT'**  
**(For Steno-typists Junior Scale Stenographer and Senior Scale Stenographers/P.As)**

**Department of Economic & Statistical Analysis Haryana, Panchkula**

Office/Branch/Section : \_\_\_\_\_

Period under Report : \_\_\_\_\_

**Part-I**

1. Name of the employee : \_\_\_\_\_
2. Father's Name : \_\_\_\_\_
3. Designation of the post held : \_\_\_\_\_

Reporting Authority \_\_\_\_\_ Reviewing Authority \_\_\_\_\_ Accepting Authority \_\_\_\_\_

**Part-II**

- Important Notes :
1. Before writing the Annual Confidential Report, the Reporting/Reviewing/ Accepting Authorities should read carefully the instructions given in the end of the form
  2. Unless otherwise specified to the contrary, the Reporting Authority should make use of one of the gradings, i.e. 'Outstanding', 'Very Good', 'Good', 'Average', 'Below Average' in the box-blocks provided against each column.

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1.	State of Health	
2	Conduct and Character	
3	Punctuality and Regularity in attendance	
4	Ability to get along and behaviour with	
	(a) Superior Officers	(a)
	(b) Colleagues	(b)
	(c) Public	(c)
5	Amenability of Discipline	
6	Devotion to duty and Hardworking	
7	General Intelligence and keenness to learn	
8	Knowledge about Department, Branch and Office procedure	
9	Proficiency in use of State Language Hindi in his day to day official work.	

Name & Designation of the official \_\_\_\_\_

10	Whether employee stays at his Headquarters after closing of office and during holidays? Reply in 'Yes' or 'No'	
11	Proficiency in Stenography and typing	
12	Maintenance of engagement diary and timely submission of necessary papers for meetings, interviews etc.	
13	Trust worthiness in handling secret and top secret matters and papers	
14	Handling of Dak, Files, record and management and his office	
15	Handling telephones, visitors, tour programmes and engagements etc.	
16	Assistance provided in making his officer more effective (checking on details) follow ups feed back progress etc.	
17	Assessment of Integrity. Has anything come to your notice which reflect adversely on the official's integrity or his ability to honestly execute his duties? Reply in 'Yes' or 'No'.  If 'Yes', please give details	
18	Whether there are any 'adverse remarks' on the work and conduct of the employee? Reply in 'Yes' or 'No'. If 'Yes', please give details.	
19	Has the official done any outstanding or notable work meriting? Reply in 'Yes' or 'No'.  If 'Yes', please give details.	
20	Suitability for promotion or Higher scale of pay (use term 'Fit' or 'Not yet 'Fit' or 'Not yet Fit' or 'Not fit')	
21	Whether the official delivers the services or dispose of the case in a given time frame? (Reply in 'Yes' or 'No'.)	
22	Overall Grading based on the assessment made from Sr. No. 2 to 19 above.	

Signature of the Reporting Authority

Name in block letters : \_\_\_\_\_

Designation : \_\_\_\_\_

Date :

Name & Designation of the official \_\_\_\_\_

**REMARKS OF THE REVIEWING AUTHORITY**

(Tick one of these three items (a), (b) & (c) and strike out the remaining two).

- (a) I endorse the above remarks.
- (b) I generally agree with the above views subject to the following observations.  
\_\_\_\_\_  
\_\_\_\_\_
- (c) I do not agree with the above remarks in columns : \_\_\_\_\_

Signature of the Reviewing Authority

Name in block letters : \_\_\_\_\_

Designation : \_\_\_\_\_

Date :

**REMARKS, IF ANY, OR COUNTERSIGNATURES OF THE ACCEPTING AUTHORITY.**

Signature of the Accepting Authority

Name in block letters : \_\_\_\_\_

Designation : \_\_\_\_\_

Date :

**IMPORTANT INSTRUCTIONS FOR FILLING IN THE FORM**

1. The following prescribed time Schedule for writing Annual Confidential Report may strictly be adhered to:
  - (a) The Reporting Authority must write the report before 15<sup>th</sup> April;
  - (b) The Reviewing Authority must record its comments before 30<sup>th</sup> April; and
  - (c) The Accepting Authority must record its acceptance before 15<sup>th</sup> May.
2. The Reporting Authority should use the prescribed terminology for each item and write one of the choice in the box-block mentioned against these items.
3. The Reporting Officer should record 'adverse remarks' if any, in column at Sr. No. 17 and nothing be written alongwith the box-block meant for Grading only.
4. While recording remarks 'Integrity' in column at Sr.No. 16, instructions contained in para 4, of Consolidating instructions on confidential reports, read with instructions No. 61-20-85-S(I), dated 12.12.85 must be gone through carefully.
5. The Reporting Officer should make a mention of any defects noted and any punishment inflicted on the employee or written warning(s) issued to him during the period under report to give any correct picture of his work and conduct.
6. The Report should be a true and objective assessment of the employee's ability and character as reflected in his day to day official work during the period under repot.
7. Signatures in full alongwith date be put up by the Reporting/Reviewing/Accepting Authorities.

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**GOVERNMENT OF HARYANA**

**FORM OF 'ANNUAL CONFIDENTIAL REPORT'  
(For Group A, B, C and D posts)**

**Department of Economic & Statistical Analysis Haryana, Panchkula**

Office/Branch/Section: \_\_\_\_\_

Period under Report: \_\_\_\_\_

**Part-I**

1. Name of the Employee: \_\_\_\_\_
2. Father's Name: \_\_\_\_\_
3. Designation of the post held: \_\_\_\_\_

Reporting Authority \_\_\_\_\_      Reviewing Authority \_\_\_\_\_      Accepting Authority \_\_\_\_\_

1. "Whether the officer/official delivers the services or dispose of the case in a given time frame ?  
(Reply in 'Yes' or 'No') \_\_\_\_\_

Signature of the Reporting Authority

Name in block letters: \_\_\_\_\_

Designation: \_\_\_\_\_

Date: \_\_\_\_\_

**REMARKS OF THE REVIEWING AUTHORITY**

(Tick one of these three items (a), (b) & (c) and strike out the remaining two)

- (a) I endorse the above remarks:
- (b) I generally agree with the above views subject to the following observations.  
\_\_\_\_\_  
\_\_\_\_\_
- (c) I do not agree with the above remarks:  
\_\_\_\_\_

Signature of the Reviewing Authority

Name in block letters: \_\_\_\_\_

Designation: \_\_\_\_\_

Date: \_\_\_\_\_

**REMARKS, IF ANY, OR COUNTER SIGNATURES OF THE ACCEPTING AUTHORITY.**

Signature of the Accepting Authority

Name in block letters: \_\_\_\_\_

Designation: \_\_\_\_\_

Date: \_\_\_\_\_