## ATOMIC ENERGY EDUCATION SOCIETY Anushaktinagar, Mumbai-94

## FORM-6

### (PROFORMA FOR RECOMMENDING A WORK ASSISTANT WORKING IN AEC SCHOOLS/JC AND AEES INCLUDING DRIVERS FOR AEES AWARD)

(Please submit one passport size photograph attested by the Principal and name of the applicant written on the reverse in separate envelope)

Part A to be filled in by the individual and Part B is to be filled by the Principal

<u>PART – A</u>

### PARTICULARS OF THE WORK ASSISTANT

1.	Name ( in block letters)	First Name Middle Name Last Name	:
2.	<ul><li>a) Emp. Id</li><li>b) Date of Initial Appoints</li><li>c) Grade on Initial Appoints</li></ul>		: :
3.	Designation & School Addr with PIN code	ess	:
4.	Date of Birth & Age (as on 3 (dd/mm/yyyy format)	1-3-2020)	://20Age:yearsmonth(s)day(s

- 5. Gender (Male/Female)
- 6. (a) Academic qualification (At the time of joining AEES) (Chronological Order from SSC/class X ):

:

S.No.	Examination/ Degree	University/Board/Dept.	Month & Year of passing	Subject(s)

S.No.	Examination/ Degree	University/Board/Dept.	Month & Year of passing	Subject(s)

(b) Academic gualification	acquired after joining AEES (In chronological or	der):
(b) / leadenne quanneation	acquired arter Johning / 220 (in chronological or	acij.

## 7. (a) SERVICE RECORD (Regular service in AEES)

			vice Duratio	n	Class		Any other
Name & Address of	Designation	From	То	Total	Subj	ects	responsibiliti
the School		dd-mm-yy	dd-mm-yy	(yy <i>,</i> mm)	Tau	ght	es discharged

(b) Service Record prior to joining AEES (In recognized school/ Organisation which is verified and counted by AEES at the time of recruitment

Name & Address of		Ser	Class		Any other		
the School	Designation	From	То	Total	Subj	ects	responsibiliti
		dd-mm-yy	dd-mm-yy	(yy,mm)	Taught		es discharged

(c) Total Service.

l	Experience in	Experience in Work Assistant	Others	Total Experience	
	No. of years & months	YrsMonths	YrsMonths	YrsMonths	

8. Record of In-service training programmes, workshops etc. attended as Participant or help to organize the same.

Sr.No.	Year	Name of the Course	Duration (Days)	Organized by	In the Capacity of participant / helping to organizing etc.	Remarks

9. Recognition / Award / Prize received by the Employee from Govt./Semi Govt./ recognized Education Institute . Awards received from Private organization are not to mention.

Name of the Award	The Institution which Awarded	Year of award	Field of recognition	Award received by self	Remark

## 10. Leave Taken

	EL with No. of Occasions	
Leave availed during awardyear (6 <sup>th</sup> Sep. 2019 to 5 <sup>th</sup> Sep. 2020)	HPL / Commuted Leave with No. of	
(0 Sep. 2019 (0 S Sep. 2020)	Occasions	
	CCL with No of Occasions	

11. Any other significant achievement / contribution not mentioned above.

Date :

Place :

Name :

Designation :

Signature of Applicant

## <u> PART – B</u>

## (GENERAL ATTRIBUTES)

Remarks about the Work Assistant based on the Fair Assessment made by her / his superiors on five point scale viz. Outstanding / Very Good / Good /Satisfactory/Poor (Please attach proof and chairs for each attributes) (Brief assessment by the Principal is compulsory)

S.No	Particulars	Brief assessment by the Principal about the staff (attach extra sheet)	Graded as
1.	Support to the office		
2.	Cleanliness and neatness of campus		
3.	Sense of Responsibility in day to day work		
4.	Competency for office routine work		
5.	Amenable to office staff and Colleagues		
6.	Maintains cordial relations with staff		
7.	Amenable to Superiors		
8.	Adaptability of the work		
9.	Rapport with students		
10.	Use electronic gadgets (Xerox, Fax, Cyclostyle, copier etc.)		
11.	Contribution towards the safety and security of the school plant/office		
12.	Contribution towards ensuring the safety of students		
13.	Contribution towards the safety of feminine gender in the work place		
14.	Attitude to ensure the safety of belongings of the students/staff		
15.	Service related to hospitality		
16.	Sense of belongingness		

17.	Accepts additional responsibility apart from his/her work profile	
18.	Public Relation with stakeholders	
19.	Punctuality and regularity in attendance	
20.	Prompting the alarming situations	
21.	Loyalty towards the job / Adhere to the moral values	
22.	Interest and initiative in professional growth	
23.	Situational Behavior and Team spirit	
24.	Role of enhancing the image of the school in the community/AEES	
25.	Accomplishment of planned work and the quality of the work	
26.	Quest for knowledge and Informations	
27.	Service to community / Parental attitude towards disabled students/staff	
28.	Reporting of damages/malfunctions of Equipment in time occurred in the campus	
29.	Readiness for supporting the management in odd hours	
30.	National Integration working in Team without and maintaining good working relation with everyone without differentiating between Region/Religion/Caste / Greed	

# IT IS CERTIFIED THAT ALL THE INFORMATION PROVIDED IN PART-A TO PART-C HAVE BEEN CHECKED AND FOUND CORRECT.

RECOMMENDATION OF THE PRINCIPAL:

### SIGNATURE OF THE PRINCIPAL

Date : Place : Name : Designation :

## PART-C

### (Evaluation by School/Centre Level Committee)

Supporting documents proof from Part A to C wherever applicable, should be verified. Assessment should be done by referring the point no. 1 to 10 from Part B.

Contribution by Work Assistant (Non-Teaching Staff)

(30 Marks)

S.No	Particulars of the parameter	Maximum Marks	Marks Awarded	Remark
1.	Support to the office	3		
2.	Cleanliness and neatness of campus	3		
3.	Sense of Responsibility in day to day work	3		
4.	Competency for office routine work	3		
5.	Amenable among colleagues	3		
6.	Maintains cordial relations with staff	3		
7.	Amenable to Superiors	3		
8.	Adaptability of the work	3		
9.	Rapport with students	3		
10.	Use electronic gadgets (Xerox, Fax, Cyclostyle, copier etc.)	3		
	TOTAL MARKS	30		

The assessment to be done by taking inputs from  $\ensuremath{\mathsf{Part}}-\ensuremath{\mathsf{C}}$ 

3 marks for Outstanding

2 marks for Very Good

1 mark for Good

RECOMMENDATION OF THE CHAIRMAN, SCHOOL/CENTRE LEVEL COMMITTEE

	Name of Member	Signature
1		
2		
3		
4		
5		

SIGNATURE CHAIRMAN. SCHOOL/CENTRE LEVEL COMMITTEE Name : Designation : Seal

Date : Place :

## <u> PART - D</u>

# (FORM TO BE FILLED IN BY THE Cluster COMMITTEE)

Evaluation at central level for Lab. Assistants (40 Marks)

(All documents / proofs may be verified and assessment can be made by the Central Level Committee)

## Contribution by Work Assistants (Non-Teaching Staff)

S.No	Particulars of the parameter	Maximum Marks	Marks Awarded	Remark
1.	Contribution towards the safety and security of the school plant	2		
2.	Contribution towards ensuring the safety of students	2		
3.	Contribution towards the safety and security (Staff and students)	2		
4.	Attitude / present ability to ensure the safety of belongings of the students	2		
5.	Service related hospitality to School Management / Visitors	2		
6.	Sense of belongingness	2		
7.	Accepts additional responsibility apart from his/her work profile	2		
8.	Public Relation with stakeholders	2		
9.	Punctuality and regularity in attendance	2		
10.	Prompting the alarming situations in the school	2		
TOTAL MARKS		20	out of 20 To be converted out of 30	

SIGNATURE CHAIRMAN. CLUSTER LEVEL COMMITTEE Name : Designation : Seal

Date : Place :

S.No	Particulars of the parameter	Maximum Marks	Marks Awarded	Remark
1.	Loyalty towards the job / Adhere to the moral values	3		
2.	Interest and initiative in professional growth	2		
3.	Situational Behavior and Team spirit	2		
4.	Role of enhancing the image of the school in the community	3		
5.	Accomplishment of planned work and the quality of the work	3		
6.	Service to community / Parental attitude towards disabled students/staff	3		
7.	Reporting of damages/malfunctions occurred in the campus	3		
8.	Readiness for supporting the management in odd hours	3		
9.	Leaves (To be assessed as per point 5 in Form A)	6		
	TOTAL MARKS	28		

## <u>PART – F</u> (To be filled in by Central Committee)

## APAR/ACR Grading obtained by the candidate in last 3 years

Year	Grade obtained	Grade Point
	Total Grade Points (Out of 12)	

APAR Grading	Outstanding	Very Good	Good	Satisfactory	Poor
Grade Point	4	3	2	1	0

## TOTAL MARKS AWARDED BY CENTRAL COMMITTEE (OUT OF 40):

EVALUATION	APAR	CENTRAL LEVEL
(Part E)	(Part F)	(Total=Part E + Part
(Out of 28)	(Out of 12)	F)
		(Out of 40)

## TOTAL MARKS OBTAINED BY THE CANDIDATE IN ALL LEVELS (Center + Cluster Level)

SCHOOL LEVEL	CLUSTER LEVEL	CENTRAL LEVEL	TOTAL
(Part C)	(Part D)	(Part F + Part F)	(Out of 100)
(Out of 30)	(Out of 30)	(Out of 40)	

## REMARKS / RECOMMENDATIONS OF THE CENTRAL LEVEL COMMITTEE

	Name of Member	Signature
1		
2		
3		
4		
5		

SIGNATURE CHAIRMAN, CENTRAL LEVEL COMMITTEE Name : Designation : Seal

Date : Place :