

Assessment Period :

Employee Name :

Emp ID :

MARKS GIVEN

Sl No	Type	Reporting Officer	Reviewing Officer	Accepting Officer
1	Key Responsibility (Max : 60 Mark)			
2	Initiative (Max : 10 Mark)			
3	Team Work (Max : 10 Mark)			
4	Quality of Work Punctuality (Max : 10 Mark)			
5	Punctuality (Max : 10 Mark)			
	TOTAL (Max : 100)			

Name & Designation of Reporting Officer :

Remark of Reporting Officer :

Signature of Reporting Officer :

Name & Designation of Reviewing Officer :

Remark of Reviewing Officer :

Signature of Reviewing Officer :

Name & Designation of Accepting Officer :

Remark of Accepting Officer :

Signature of Accepting Officer

SCREENING COMMITTEE