

MCM DAV College for Women, Chandigarh

SELF-APPRAISAL FORM for Teaching Faculty

Permanent / Temporary Teachers

ACADEMIC YEAR : _____

1. General Information

a	Name	
b	Address (Residential)	
c	Address (Permanent)	
d	Mobile Number	
e	E-Mail Address	
f	Designation	
g	Department	
h	Date of Birth	
i	Area of Specialization (if M.Phil or Ph.D)	
j	Date of Joining the Institution	
k	Teaching Experience (Total) (This Institution + Other Institutions)	

2. Academic Qualification added in the current year (if any):

3. Improvement of Professional Competence:

Details regarding attending - Refresher courses/Orientation/Summer Schools/ Workshops/MOOCs/Open University courses /M. Phil., Ph.D. Course work (current year):

No	Course Details	No. of Days	Organisers/ Sponsoring Agency	Place and Date
1				
2				

4. Teaching

a. Classes being taught in the current year:

Class	Subject	Periods	
		Assigned/Week (Lecture/ Practical/Compo/ Tutorials)	Extra Classes Taken (if any)

b. Result Statement of Classes taught in last session:

Class	Section	Subject	No. of Students Appeared	No. of Students Passed	Pass Percentage	PU Pass Percentage

5. Research Contributions:

a. Number of Books/ Research Papers Published/Presented at Seminars/ Conferences in the current year:

	Peer reviewed journals		Non-reviewed Journals		E-journals	Conference Proceedings	Books without ISBN	Books with ISBN	Chapters in books with ISBN
	UGC Approved	Others	UGC Approved	Others					
International									
National									
State/ Local									
Impact Factor									
Citations									
Database Enlisted									

b. Research projects (current year):

Title of the Project	Name of the Funding Agency	Amount Sanctioned/ Received	Duration

c. Details as M.Phil./Ph.D. Research Supervisors:

Name of the Student	Supervisor / Co-supervisor	Year	Enrolment No. & Date	University/ College	Completed / Submitted / Pursuing

6. Details of participation in the following:

i. Examination Duties - Invigilation Duties (current year):

	College Level	University Level	Any Other
Assistant Supdt.			
Deputy Supdt.			
Superintendent			
Any Other (Flying Squad)			

ii. Paper Setting – Give Details (current year):

Class	Semester	College Level	University Level	Any Other

iii. Evaluation of Answer-sheets - Give Details (current year):

Class	Semester	College Level	University level	Any Other

7. Participation in Corporate Life:

a. Details of the Contribution in College Committees:

Committees	Convenor / Coordinator / Member	Contribution

b. Participation in Seminars, Conferences, Symposia organized during the year:

	Funding Agency/ Sponsoring Agency	Title of the Conference / Symposium	Duration	Director / Convenor / Coordinator/ Member
College Level				
State Level				
National Level				
Inter-National				

Level				
Any Other				

8. Membership of Professional Bodies, Board of Studies, Editorship/Reviewer of Journals etc, during the year:

	Name of the Body/ Organization / Institution	Membership - Annual/Life
University		
National Level		
Inter-National Level		

9. Information about Counseling/Mentoring/Remedial Classes rendered to the students:

Class	Sessions / Dates	Duration	Issues handled / Strategy Employed

11. Future Plans (Briefly)

- 1. I hereby declare that the information given above is true to the best of my knowledge and belief.**

Name and Signature of the Teacher

Date -
