

Academic Year:

A P Shah Institute of Technology, Thane: Self Appraisal Form

A P Shah Institute of Technology, Thane

Self-Appraisal Form

Date:

Instructions:											
Self-appraisal is to be filled	l once in academic year.										
Faculty needs to assign the	Faculty needs to assign the makes for his/her performance.										
This form can be customise	d by inserting relevant items t	from annexures with th	ne form.								
Customised form shall be s	ubmitted to HOD in hard copy	y .									
HOD shall submit hardcopy	to principal after assessing t	he form									
Total Marks Obtained:	Self-assessment:	/100	Assessment by HOD:								
	Jen-assessment.	7100	Assessment by 1100.								
/100											
Faculty Details:											
Name of Faculty:											
Designation:											
Department:											
Date of Joining:											
Date of Birth:											
Educational Qualifications:											
Experience	Teaching:		Industry:								
	<u> </u>		1								

Signature of Faculty:

Signature of HOD:

Nature of Appointment (Adhoc/Probationer/Permanent):	
Present Salary Drawn:	

1. Academic Performance: (Max Marks: 40) Self-assessment: Assessment by HOD:

	1.1 Teaching Load									
Sr. No.	Subjects Taught	Class	l_	Departmen Semest t erT	Teaching Load per week		Conducted(hrs		Online Student Feedback	
					Theory	Lab	Tutorial s		Practic al	(1-5)

	1.2 Teaching Assistant (TA) Details						
Name of TA	Class	Sem	Subject contribution				

	1.3 1	New b	pooks(Presently not available) suggested to	library	
Subject	Class	Sem	Title	Publication	Author

	1.3 Additional Experiments added to the Lab Manual							
Subject Class Sem Name of the updated experiment								

1.4 Innovative Teaching Techniques adopted				
Subject	Class	Sem	Technique adopted	

2. Regularity and Attendance: (Max Marks: 10)

Self-assessment:

Assessment by HOD:

2.1 Leaves									
Type of leave	Pre-sanctioned	Post-sanctioned	Total						
Casual Leave									
Outdoor Leave									
Medical Leave									
Special Leave									

3. Participation in College/ Departmental activities: (Max Marks
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Self-assessment: Assessment by HOD:

Please copy and paste relevant tables from **Annexure-I** here.

4. Self-Improvement Initiatives: (Max Marks: 15)

Self-assessment: Assessment by HOD:

Please copy and paste relevant tables from **Annexure-II** here.

5. Representing college in external environment: (Max Marks: 10)

Self-assessment: Assessment: by HOD:

Please copy and paste relevant tables from **Annexure-III** here.

Annexure-I

	Time Table Related Activities		
Sr. No.	Role	Department	Semester

Class Advisor

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Signature of Faculty:

Signature of HOD:

Sr. No.	Class	Semester	Branch	Duties Perforn	ned	
		Sports Ad	ctivities			
Sr. No.	Name of sport		Category (Indoor/d		Role(Incharge /co-ordinator s)	Ojus/Other College
		Cultural A	ctivities			
Sr. No.	Name of Event			Category	Role(Incharge/ co-ordinators)	'

	Project Based Learning						
Sr. No.	Subject	Role	Description	Duration (From- to)			

UDAAN Incubation Activities

Area of Participation	Contribution	Duration (Date from- to)

	Placement Activities						
ISr. No	'	Name of companies visited	Number of students placed	Department			

	In house Placement activities (Training/ workshops conducted)						
Sr. No	Workshops and trainings conducted	Class		Number of students participated			

	Student organization activities							
IST NO	Event/workshops and trainings conducted	Class	Departmen t	Number of	Role (Incharge/ co-ordinat or)	Duration	Date (From- to)	

	Industrial Visits Related Activities								
Role	No of days	class	department	organized by (IEEE, CMSA, ITSA, TPO, etc.)	Name of company visited	Descripti on		Date (From- to)	

	Admission Process related Activities								
Role(In charge /Co-ordinator)	Duties(Confirmation/Verification)	Class (Wr	ite YES whichever applicable)	Duration (Date from- to)	Number of Days				
		FE	DSE						

Exam related Activities (University Exams: Supervision Details)

S	Sr. No.	Role(CS/SS/JS/US/CAP In charge/Exam In charge)	Exam	Number of Sessions		Number of Supervisions (Days)
				Morning	Evening	

	Exam Assessment Related Activities (External Work Conducted)						
Sr.No.	Role		College/ University	Subject		Number of papers revaluated	Number of papers moderat ed

	Exam related Activities (Assessment/Oral/Practical Exams Conducted)						
Sr. No.	Name of Subject	Semest er	Exam type (Assessment/Oral/Practi cal)				

	IT Maintenance					
Sr. No	Issues solved	Description	Task Completed	Date		

	(Yes/No/Ongoing)	

	Lakshya related Activities									
Sr. No.	Activities conducted	Description	Date	Number of students participated						

	College/Department Magazine/Newsletter related Activities								
Type (Magazine/ Newsletter)	Title	Role(Incharge/co- ordinators)	Year of Publication						

	Conduct of STTP									
Sr. No.	Role (Organizing Committee)		Technolog y	Duration of course	Date (From- to)	No of Participa nts	Departm ent			

	Departmental UG Projects Undertaken									
Sr. No.	Sr. No. Role Title of Project Number of students									

Annexure-II

Papers Published in National Conference									
Sr. No.	Title of paper published in Nationalconference	Month/ye ar	conferen	SN	Co-auth	Impact Factor of Conferenc		Rating	Online link

			е	s	

	Papers Published in International Conference										
Sr. No.	Title of paper published in International conference	Month/ye ar	conferen	SN	Co-	Impact Factor of Conferenc e		Rating	Online link		

	Papers Published in Journals									
Sr. No.	Title of paper published in Journal	I -	Name of journal	ISBN/IS SN Number	ICo-	Factor of	Number of citations	Rating	Online link	

^{*} Add extra tables for activities not covered in this form.

MOOCS

Sı	r. No.	Name of MOOCS course undertaken	Month/year	Duration of course	Certification Completed (Yes/No)

	SWAYAM									
Sr. No.	Name of Swayam course undertaken	Month/year	Duration of	Certification Completed (Yes/No)						

	Short- term training Programs									
Sr. No.	Name of STTPs attended	Hechnology	Duration of course	Date (From- to)	Internal/ External	Name of the Institute where attended				

	Seminars									
Sr. No.	Name of seminars attended	Technolog y	Duration of course	Date (From- to)	IInternal/ External	Name of the Institute where attended				

^{*} Add extra tables for activities not covered in this form.

Annexure - III

Resource person in STTP/Training course/ Lecture Talks					
Sr. No.	Topic Name	Departmen t	Name of the institute	Number of participants	

Contribution to Syllabus Framing					
Sr. No.	Name of the subject	IRole	Name of University	Other Details	

Member of University Committee					
Sr. No. Name of Committee		Roles and Responsibilities	Designation		

Consultancy Assignment						
Sr. No.	Roles and Responsibilities	Type of Work/Domain	Organization	Duration	No. of visits	

External Projects/Competitions Participations						
Sr. No.	Role	Description	Contribution	University	Duration	Comments

^{*} Add extra tables for activities not covered in this form.