

**Dinkarrao K.Shinde Smarak Trust's
Dr. A.D.Shinde College of Engineering
Bhadgaon-416502**

ANNUAL PERFORMANCE APPRAISAL FOR THE FACULTIES FOR THE YEAR 20__

EMPLOYEE DETAILS

Name	:	Designation	:
Department	:	College	:
Date of Joining	:	Date of Birth & Age:	:

GUIDELINES

- 1. The filled in forms are to be routed through the HoDs & Principals*
- 2. The particulars given by the faculties are to be verified with records, originals or copies of certificates by the HoDs duly counter verified by the Principals*
- 3. Instructions given under each column may carefully be read before filling the form.*
- 4. This form is to be submitted every year from 1st June to 30th June.*
- 5. Necessary Documentaries are attached wherever required.*

1. Educational Qualification:

Degree	Branch/ Specialization	College	University	Year of completion	%
UG					
PG					
Ph.D.					

2. Experience Details:

S.No.	Position held	Institution/Industry	Period		Exp. in Years	Verify Document s By HOD
			From	To		
1						
2						
3						
4						
5						
6						
7						

2. ACADEMIC PERFORMANCE INDICATORS

a. Total Teaching Hours Per week

Class /Sem	Year	Subject	Hours allotted per week	Verified by HOD

Total		
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3.TEACHING, LEARNING AND EVALUATION RELATED ACTIVITIES

Item		Score self (5/4/3)	Score obtained by HOD
i.	Availability to students during working hours		
ii.	Punctuality to classes		
iii.	Regularity in taking classes as per time table		
iv.	Maintenance of students attendance register and course files		
v.	Regularity in giving home assignments		
vi.	Availability for examination work including invigilation/valuation		
vii.	Participation in curriculum/ Syllabus development		
viii.	Participation in college/departmental activities		
ix.	Preparation of course hand outs		
x.	Content delivery and nature of communication		

4.Academic Results:

Class	Year	Subjects	Analytical	Theory	Pass Percent	Verified by HOD

5.Students Feedback (Filled by HOD):

Class/ Sem	Year	Subject	Feedback - Excellent/ Good / Average / Poor	Verified by HOD

6. Details of Papers Presented in National/International Journals Conferences attended Books Published and Patent

Sr.No	Particular	Details with ISSN NO. (Attach Extra Sheet if Required)

7. Additional Responsibilities:

NBA / NAAC / NIRF / ATAL/ SWACCHTA
 Placement Support
 Branding the Institute
 Summer Projects
 Industrial relations
 Industrial Visits Students
 Internship On the Job
 Training Students
 Counseling
 NCC / NSS/ YRC / Sports etc.

Responsibilities	Verified by HoD in consultation with the concerned staff incharge
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8. Contributions in Admissions: (If required use extra sheet) :

Name of the Student	Department	College	Verified by HOD

9. To Be Filled By Office Authority

No.of Days Early going	No.of Days Late Coming	No.of Days Casual Leave Taken	Other Leave Details (If Any)
Signed By Respective Authority			

10. Your strength your Weakness

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.....

11. Any suggestion to improve your department and our Institution

ASSESSMENT BY HOD

Overall Feedback	Mark	Remarks If any
Excellent Good Average Poor (Tick whichever is applicable)		

Note : Excellent – 5 marks / Good – 3 marks / Average – 2 marks / Poor – Nil

Certified that I have verified all the proof of evidence, original or true copies and found them correct

**Signature of the HoD
with Name & Date**

ASSESSMENT & RECOMMENDATION BY PRINCIPAL

Overall Feedback	Mark	Remarks If any
Excellent Good Average Poor (Tick whichever is applicable)		

Note : Excellent – 5 marks / Good – 3 marks / Average – 2 marks / Poor – Nil

Certified that I have counter verified all the particulars submitted and found them correct.

**Signature of the PRINCIPAL
With Name & Date**

RECOMMENDATION BY Secretary /Chairman for Appraisal

Appraisal of particular staff	Remarks
Recommended /Not Recommended	

- Forwarded the Same to implement for principal and Registrar/Office Suptd./Account Section

**Signature of
Secretary/Chairman**

Dinkarrao K.Shinde Smarak Trust's
Dr. A.D.Shinde College of Engineering
Bhadgaon-416502

ANNUAL PERFORMANCE APPRAISAL FOR THE FACULTIES FOR THE YEAR 2024

EMPLOYEE DETAILS

Name : Dr. A.A. Kumbhar Designation : Asst. prof (HOD)
Department : Mechanical Engineering College : DADSCOE
Date of Joining : 29/01/2018 Date of Birth & Age : 15/03/1989-35


GUIDELINES

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3. Instructions given under each column may carefully be read before filling the form.
4. This form is to be submitted every year from 1st June to 30th June.
5. Necessary Documentaries are attached wherever required.

1. Educational Qualification:

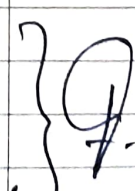
Degree	Branch/ Specialization	College	University	Year of completion	%
UG	Mechanical	AITM	VTU	2014	58%
PG	Mechanical/MDD	TJIT	VTU	2017	64%
Ph D.	—	—	—	—	—

2. Experience Details:

S.No.	Position held	Institution/Industry	Period		Exp. in Years	Verify Document s By HOD
			From	To		
1	Asst. prof.	DADSCOE	29/01/2018	Till.	07	
2		Bhadgaon				
3						
4						
5						
6						
7						

2. ACADEMIC PERFORMANCE INDICATORS

a. Total Teaching Hours Per week

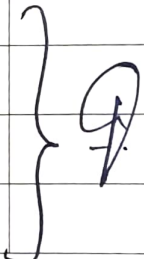
Class /Sem	Year	Subject	Hours allotted per week	Verified by HOD
SE N	II	TOM-I	03+06 = 09	
BE VIII	N	NV	03+06 = 09	
TE V	III	ME	03+02 = 05	
BE VII	IV	M&D	03+06 = 09	

Total	32	
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3.TEACHING, LEARNING AND EVALUATION RELATED ACTIVITIES

Item	Score self (5/4/3)	Score obtained by HOD
i. Availability to students during working hours	05	05
ii. Punctuality to classes	05	05
iii. Regularity in taking classes as per time table	05	05
iv. Maintenance of students attendance register and course files	05	05
v. Regularity in giving home assignments	05	05
vi. Availability for examination work including invigilation/valuation	05	05
vii. Participation in curriculum/ Syllabus development	04	04
viii. Participation in college/departmental activities	05	05
ix. Preparation of course hand outs	05	05
x. Content delivery and nature of communication	05	05

4. Academic Results:

Class	Year	Subjects	Analytical	Theory	Pass Percent	Verified by HOD
SE/IV	II	TOP-I	✓	✓		
BE/VIII	IV	NV	✓	✓		
TE/IV	III	ME	✓	✓		
BE/VII	IV	MSD	✓	✓		

5.Students Feedback (Filled by HOD):

Class/ Sem	Year	Subject	Feedback - Excellent/ Good / Average / Poor	Verified by HOD
SE/IV	II	TOP-I	Good	
BE/VIII	IV	NV	Good	
TE/IV	III	ME	Good	
BE/VII	IV	MSD	Good	

6. Details of Papers Presented in National/International Journals Conferences attended Books Published and Patent

Sr.No	Particular	Details with ISSN NO. (Attach Extra Sheet if Required)
01	Automatic solar grass cutter	2582-7421
02	Lifting trolley for Easy mounting	2349-5162

7. Additional Responsibilities:

NBA / NAAC / NIRF / ATAL/ SWACHTA ✓
Placement Support ✓
Branding the Institute ✓
Summer Projects ✓
Industrial relations ✓
Industrial Visits Students ✓
Internship On the Job ✓
Training Students ✓
Counseling ✓
NCC / NSS/ YRC / Sports etc. ✓

*Dept. LIC coordinator

9.

Responsibilities	Verified by HoD in consultation with the concerned staff incharge
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8. Contributions in Admissions: (If required use extra sheet)

:

Name of the Student	Department	College	Verified by HOD

9. To Be Filled By Office Authority

No.of Days Early going	No.of Days Late Coming	No.of Days Casual Leave Taken	Other Leave Details (If Any)
2	5	3	4
Signed By Respective Authority			

10. Your strength

your Weakness

Accept challenge.
Self motivator
Good listener
Team worker

11. Any suggestion to improve your department and our Institution

9.

Date:


Faculty Signature

ASSESSMENT BY HOD

Overall Feedback	Mark	Remarks If any
<div> <div>✓</div> <div>Excellent</div> <div>Good</div> <div>Average</div> <div>Poor</div> </div> <div>(Tick whichever is applicable)</div>	05	

Note : Excellent – 5 marks / Good – 3 marks / Average – 2 marks / Poor – Nil

Certified that I have verified all the proof of evidence, original or true copies and found them correct


 Signature of the HoD
 with Name & Date

ASSESSMENT & RECOMMENDATION BY PRINCIPAL

Overall Feedback	Mark	Remarks If any
<div> <div>Excellent</div> <div>✓ Good</div> <div>Average</div> <div>Poor</div> </div> <div>(Tick whichever is applicable)</div>	04	Promotion for increment

Note : Excellent – 5 marks / Good – 3 marks / Average – 2 marks / Poor – Nil

Certified that I have counter verified all the particulars submitted and found them correct.


 Signature of PRINCIPAL
 A.D.Shinde College of Engineering
 Bhadgaon, Tal. Gadhinglaj, Dist. Kolhapur

RECOMMENDATION BY Secretary /Chairman for Appraisal

Appraisal of particular staff	Remarks
Recommended /Not Recommended	Recommended

- Forwarded the Same to implement for principal and Registrar/Office Suptd./Account Section


 Signature of
 Secretary/Chairman
 Secretary
 Dinkarrao K. Shinde Smarak Trust
 Gadhinglaj, Dist. Kolhapur, Pin-416502

Dinkarrao K.Shinde Smarak Trust's
Dr. A.D.Shinde College of Engineering
Bhadgaon-416502

ANNUAL PERFORMANCE APPRAISAL FOR THE FACULTIES FOR THE YEAR 20__

EMPLOYEE DETAILS

Name : Mahesh M. Talikoti
Department : Computer Science and Eng
Date of Joining : 15/12/2023
Designation : Computer Hardware & Network
College : Dr. A.D. Shinde College of Eng
Date of Birth & Age : 03/07/1984 40y

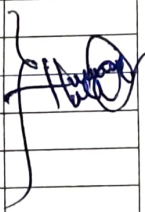
GUIDELINES

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2. The particulars given by the faculties are to be verified with records, originals or copies of certificates by the HoDs duly counter verified by the principals
3. Instructions given under each column may carefully be read before filling the form.
4. This form is to be submitted every year from 1st June to 30th June.
5. Necessary Documentaries are attached wherever required.

1. Educational Qualification:

Degree	Branch/ Specialization	College	University	Year of completion	%
UG	B. A	K. V. Gananday College Hui	Bangalore University	July - 2009	
PG					
Ph.D.					

2. Experience Details:

S.No.	Position held	Institution/Industry	Period		Exp. in Years	Verify Documen ts By HOD
			From	To		
1	Hardware Trainee Eng	Arun Infotech.	Mar-2005	Aug-2006	18 m.	
2	Hardware Engineer	Prime Computer's	Sep-2006	July-2007	11 months	
3	Office Assistant	Shri. Keshavra Dhanraj Rural Devel	Mar-2011	Aug-2015	5y - 5 mon	
4	Assistant manager	- - -	Apr-2015	Feb-2016	11 - month	
5	Lab Technician	S3PM Nidagahi	Sep-2021	D - 2023	2y	
6	Hardware Eng and Networking	Dr. A.D. Shinde College of Eng	Dec-2023	-	-	
7						

2. ACADEMIC PERFORMANCE INDICATORS NA

a. Total Teaching Hours Per week

Class /Sem	Year	Subject	Hours allotted per week	Verified by HOD
Total				

NA

Item		Score self (5/4/3)	Score obtained by HOD
i.	Availability to students during working hours		
ii.	Punctuality to classes		
iii.	Regularity in taking classes as per time table		
iv.	Maintenance of students attendance register and course files		
v.	Regularity in giving home assignments		
vi.	Availability for examination work including invigilation/valuation		
vii.	Participation in curriculum/ Syllabus development		
viii.	Participation in college/departamental activities		
ix.	Preparation of course hand outs		
x.	Content delivery and nature of communication		

NA

Class	Year	Subjects	Analytical	Theory	Pass Percent	Verified by HOD

NA

Class/ Sem	Year	Subject	Feedback - Excellent/ Good / Average / Poor	Verified by HOD

N.A

[illegible]

7. Additional Responsibilities:

NBA / NAAC / NIRF / ATAL/ SWACHTA
Placement Support
Branding the Institute
Summer Projects
Industrial relations
Industrial Visits
Students Internship
On the Job Training
Students Counseling
NCC / NSS/ YRC / Sports etc.

Responsibilities	Verified by HoD in consultation with the concerned staff incharge
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8. Contributions in Admissions: (If required use extra sheet)

Name of the Student	Department	College	Verified by HOD

9. To Be Filled By Office Authority

No.of Days Early going	No.of Days Late Coming	No.of Days Casual Leave Taken	Other Leave Details (If Any)
Signed By Respective Authority			

10. Your strength
Weakness

your

11. Any suggestion to improve your department and our Institution

Date:

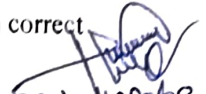

Faculty Signature

ASSESSMENT BY HOD

Overall Feedback	Mark	Remarks If any
<div> <div>Excellent</div> <div>Good</div> <div>Average</div> <div>Poor</div> </div> <div>(Tick whichever is applicable)</div>	5	Eligible for increment

Note : Excellent – 5 marks / Good – 3 marks / Average – 2 marks / Poor – Nil

Certified that I have verified all the proof of evidence, original or true copies and found them correct



Signature of the HoD
 with Name & Date

ASSESSMENT & RECOMMENDATION BY PRINCIPAL

Overall Feedback	Mark	Remarks If any
<div> <div>Excellent</div> <div>Good</div> <div>Average</div> <div>Poor</div> </div> <div>(Tick whichever is applicable)</div>	04	Recommended

Note : Excellent – 5 marks / Good – 3 marks / Average – 2 marks / Poor – Nil

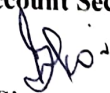
Certified that I have counter verified all the particulars submitted and found them correct.


Signature of the PRINCIPAL
 A.D.Shinde
 College of Engineering
 Bhadgaon, Tal. Gadhinglaj, Dist. Kolhapur

RECOMMENDATION BY Secretary /Chairman for Appraisal

Appraisal of particular staff	Remarks
<div>Recommended /Not Recommended</div>	<div>Recommended</div>

- Forwarded the Same to implement for principal and Registrar/Office Suptd./Account Section


Signature of Secretary/Chairman
 an