

**National Institute of Electronics and Information Technology
New Delhi**

**CONFIDENTIAL REPORT FOR CLEARANCE OF PROBATION PERIOD
(DIRECT RECRUITMENT/ PROBATION)**

(PART I)

1. Name of the employee:
2. Designation:
3. Pay Structure:
4. Academic & Professional Qualification:
5. Whether probation is on Promotion or Fresh Appointment :
 - (a) In case of promotion
 - (i) Promotion Order No. & Date
 - (ii) Date of joining the organisation:
 - (ii) Date of joining in the present post:
 - (b) In case of Direct Recruitment
 - (i) Appointment Order No. & Date
 - (ii) Whether C&A Verification done
 - (iii) Whether medically examined and found fit
6. Duration of Probation Period:
7. Date of completion of Period of Probation:
8. If extended, date of expiry of Probation after extension:
 - i) Ist Ext.
 - ii) IInd Ext.
9. Period of Absence from duty on account of leave etc:
10. Period covered by the present Report:
From _____ To _____

(PART II)

(Self appraisal – to be filled by the employee)

1. Name & Designation of the employee
2. Period covered in the present report
From _____ To _____
3. Centre/ Branch where posted during the Probation Period:

Centre/ Branch	From (date)	To (date)	Name & Designation of the Reporting Officer

4. Brief description of the work done during the period

5. Achievements (during the period)

6. Knowledge of Hindi language: Whether proficient/ having working knowledge
7. Knowledge of Computer (for non S&T employees)

Place:

Date:

(Signature of the employee)

(Name :)

6970
7. Knowledge of Office Procedures:

8. Status of health:

Recommended/ Not Recommended for probation clearance

(If not recommended, kindly fill up the Part IV of the form)

Date _____

Signature of Reporting Officer _____

Name & Designation _____

(PART IV)

1. In case the reporting officer is not satisfied with the work and conduct of the employee reported upon during the initial period of probation, please indicate:
 - a) Whether the deficiencies reported in the probation report were communicated to him. If communicated in written, please enclose copy, if communicated orally please specify:
 - b) Whether the employee was given adequate counseling and guidance to overcome his deficiencies:

Place _____

Signature of Reporting Officer _____

Date _____

Name & Designation _____

(PART V)

(TO BE COMPLETED IN CASE REPORT PERTAINS TO EXTENDED PERIOD OF PROBATION):

Please highlight his significant contribution/ improvement or deterioration observed in his working during the period underreport. Please also confirm whether the employee was given adequate counseling guidance to overcome his deficiencies.

Place _____

Signature of Reporting Officer _____

Date _____

Name & Designation _____

(PART VI)

(Remarks of the next Higher Officer)

1. General Assessment:
2. Agree/ disagree with the remarks and recommendation made by Reporting Officer in Part III, IV and Part V (if applicable)
3. Whether, the Employee be treated to have successfully completed to period of Probation:
4. Whether medically found fit? :

Signature _____

Date _____

Designation _____