

ANNUAL CONFIDENTIAL REPORT

(For ACS II and all other Technical/ Non-Technical Class I to III Officers of the State)  
See Rule 4(2) of the Assam Services (Confidential Rules) Rules 1990  
Report for the Year/ Period ending .....

**PERSONAL DATA**  
(To be filled up by the Office)

1. Name of the Officer/Employee
2. Name of Service to which belongs
3. Date of Birth
4. Present Designation.....Since.....
5. Period of absence from duty on leave, training etc during the period of report
6. Description of work on which engaged during the period
7. Any special knowledge/ Experience/ Training which facilitate to discharge the allotted work of the officer/ employee

**PART - II**

**ASSESSMENT BY THE REPORTING AUTHORITY**

1. Name(s) and Designation of the Reporting Authority :
2. Period of Service of the incumbent under the reporting authority :
3. State of Health :
4. What is your opinion about his/ her
  - a) Aptitude, Initiative, drive and efficiency for
    - i. Arrangement of work :
    - ii. Execution of work :
  - b) Intelligence :
  - c) Attendance/ conduct and amenability to discipline :
  - d) Character with particular reference to reliability: and integrity
  - e) Knowledge of Laws/ Rules and relevant office : procedure

- f) Capacity of supervision, Inspection and to :  
create Team Spirit (where applicable)
- g) Spirit of Service and relationship with public/ :  
Sub-ordinate Staff and Superior Officers
- h) Physical State and aptitude for hard touring :  
(where applicable)
- i) General remarks, if any :
- j) What's your opinion about his/ her fitness or :  
otherwise for advancement for next higher rank

(For Technical officers only)

- |                                |                                                |
|--------------------------------|------------------------------------------------|
| k) Professional ability        | i) Preparation of Estimates :-<br>and Projects |
| l) Promptness & correctness in | ii) Designs :-                                 |
|                                | iii) Accounts :-                               |
|                                | iv) Control of expenditure :-                  |

Date.....

Recording Authority

**Part III**

**Opinion of the Reviewing Authority**

- 1 Name and Designation of the reviewing authority :-
- 2 Period of Service of the incumbent under the reviewing authority :-
- 3 General opinion of the reviewing authority :-
- 4 Graded :-

Date.....

**Reviewing Authority**

**Part IV**

**REMARKS OF THE ACCEPTING AUTHORITY**

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Name and Designation of the Accepting authority