

Estd : 1924



Marwadi Siksha Samithi



## Ramnath Guljarilal Kedia College of Commerce

(Affiliated to Osmania University )

(Accredited with B+)

**3-1-336, Esamia Bazar, Opp.New Chaderghat Bridge, Hyderabad.  
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# TEACHING PERFORMANCE RECORD

## FACULTY PERFORMAMCE RECORD

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## BASIC PROFILE

Faculty Name: \_\_\_\_\_

Designation : \_\_\_\_\_

Department : \_\_\_\_\_

Address : \_\_\_\_\_

Contact No. : \_\_\_\_\_

Date of Joining: \_\_\_\_\_

Present Salary: \_\_\_\_\_

Given Last Increment: \_\_\_\_\_

Increment Proposed: \_\_\_\_\_

Remarks: \_\_\_\_\_

## COURSES HANDLING

Programme, Class & Name of the Course:

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

## RESPONSIBILITIES

Institutional Level:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Department Level:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**INDIVIDUAL TIME TABLE**

<b>Day</b>	<b>1<sup>st</sup> hr</b>	<b>2<sup>nd</sup> hr</b>	<b>3<sup>rd</sup> hr</b>	<b>4<sup>th</sup> hr</b>	<b>5<sup>th</sup> hr</b>	<b>6<sup>th</sup> hr</b>	<b>7<sup>th</sup> hr</b>
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							

**CIA & SBT DETAILS**

<b>Date</b>	<b>Test / Assignment</b>	<b>Date of Conduction</b>	<b>Remarks</b>	<b>Signature</b>





**VALUE ADDED COURSES /CAPABILITY ENHANCEMENT COURSES TAKEN**

Date	Year /Sem	Title of the Course	No. of Students Visited	Duration	Signature

**REFRESHER COURSES /FDPS/ SEMINARS / CONFERENCE/ SHORT TERM COURSES ATTENDED**

Date		Conducting organization	Type of the Course	Topic	Signature
From	To				

**FDP / SEMINAR / CONFERENCE / MDP / GUEST LECTURE/ SHORT TERM COURSES ORGANISED**

Date		Type of the Activity	Category (Local / Regional / National / Global)	No. Benefited	Certificate No./ Details	Signature
From	To					







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## NON – TEACHING PERFORMANCE RECORD

## **NON - TEACHING PERFORMANCE RECORD**

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6	AISHE	
7	UMS	
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9	Institutional Work	
10	Management Related Works	
11	IT Related Works	

## **BASIC PROFILE**

Name : \_\_\_\_\_

Designation : \_\_\_\_\_

Department : \_\_\_\_\_

Address : \_\_\_\_\_

Contact No. : \_\_\_\_\_

Date of Joining: \_\_\_\_\_

Present Salary: \_\_\_\_\_

Given Last Increment: \_\_\_\_\_

Increment Proposed: \_\_\_\_\_

Remarks: \_\_\_\_\_

## **RESPONSIBILITIES**

AICTE Work:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

OSMANIA UNIVERSITY Work:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

State Council Work:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Higher Education Work:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

AISHE:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

UMS Works:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Department Works:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Institutional Works:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Management Works:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

IT Related Works:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

**LEAVES / OD AVAILED**

Date	Details	Signature

**ANY OTHER INFORMATION**

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**System Admin -Head:**

**Director -Research**

**Director-General**