**CONFIDENTIAL**

**A.C.R. Form**

**(DRIVER & DAK RUNNER) NOT TO BE FOLDED**

**BPS-04 to BPS-09**



**INDUS RIVER SYSTEM AUTHORITY (IRSA)**

**ANNUAL CONFIDENTIAL REPORT**

**NAME OF SECTION/DUTY WITH:** \_\_\_**­­­­­­­­­­­­­­­­­**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ANNUAL/SPECIAL/INTERM FOR THE PERIOD ENDING \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Strike out inapplicable portions)

**PART-I**

(TO BE FILLED IN BY THE OFFICER REPORTED UPON)

1. Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Designation with BPS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Date of entry into IRSA Service:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Date of appointment in the present grade:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Qualifications: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Type of Licence held:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Type of Vehicle Driven:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. Job Description: (Nature of duties on which employed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature, Official reported upon

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**PART – II**

**PERSONAL PERFORMANCE**

1. Evaluate the Officer in the following qualities.

(The ratings in this should be recorded by initialing the appropriate box).

1. The ratings are denoted by the abbreviations are as under:-

**A (Very Good), B (Good), C (Average), D (Below Average), E (Poor)**

**Note: -** Please read Instructions before writing ACR.

Strike out inapplicable portions.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sr. #** | **STANDARD OF PERFORMANCE/**  **PERSONAL TRAITS.** | **A** | **B** | **C** | **D** | **E** |
|  | Whether he is conversant with the rules for the use of staff cars and observes them rigidly? |  |  |  |  |  |
|  | Whether he possesses adequate knowledge of the mechanism of cars and their engines, and is competent to do minor running repairs and replacement of spares? |  |  |  |  |  |
|  | Whether he has been careful on observing the ordinary courtesies and rules of traffic? |  |  |  |  |  |
|  | Whether he has been involved in any road accident or traffic offense and whether there has been any adverse entry in his Driving License during the period under review? |  |  |  |  |  |
|  | Whether he is co-operative and tactful? |  |  |  |  |  |
|  | Whether he is polite and courteous? |  |  |  |  |  |
|  | Whether he puts up clean appearance and tearing? |  |  |  |  |  |
|  | Is he amendable to discipline? |  |  |  |  |  |
|  | Is he regular and punctual in attending office and appointed place of duty? |  |  |  |  |  |
|  | Whether he takes due care of the documents of the vehicle insured to him? |  |  |  |  |  |
|  | Whether he keeps the Car/M./Cycle in neat and tidy condition and keeps watch of the timely servicing/change oil/parts according to the service manual? |  |  |  |  |  |
|  | \*While driving motor cycle/scooter, does he make use of crash helmet, sun glasses? |  |  |  |  |  |
|  | \*Does he take proper care of the mail/packages/documents on his/charge and takes signature of the recipient at the time handing them over? |  |  |  |  |  |

\* For dispatch riders only.

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**PART-III**

**REMARK OF THE REPORTING OFFICER**

1. General Assessment

(Appraise in the present grade by initialing the appropriate column below)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Very Good** | **Good** | **Average** | **Below Average** | **Poor** |
|  |  |  |  |  |

**PART-IV**

13**.** Fitness for Promotion

(Initial the appropriate box below)

(a) Recommended for accelerated promotion.

(b) Fit for promotion in his own turn.

(c) Not yet fit for promotion, but likely

to become fit in course of time.

14. **PEN-PICTURE**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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**PART-V**

**REMARK OF THE COUNTERSIGNING OFFICER**

15. How often have you seen the work of the officer reported upon?

|  |  |  |  |
| --- | --- | --- | --- |
| **Very Frequently** | **Frequently** | **Rarely** | **Never** |
|  |  |  |  |

16. Overall grading

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Very Good** | **Good** | **Average** | **Below Average** | **Poor** |
|  |  |  |  |  |

17. Evaluation of the quality of assessment made by the reporting officer.

|  |  |  |
| --- | --- | --- |
| **Exaggerated** | **Fair** | **Biased** |
|  |  |  |

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

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

**PART-VI**

1. **REMARK OF THE SECOND COUNTERSIGNING OFFICER (IF ANY)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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**GUIDELINES FOR ANNUAL CONFIDENTIAL REPORTS**

1. This form has been designed to cover the basic qualities of an officer/official. Where necessary, comments on other qualities required of an officer/official belonging to a specialized service or employed on a particular kind of duties, should be made in the blank space provided against.
2. Reporting Officer (RO) and Countersigning Officer (CO) must read instructions listed in relevant regulation of chapter No. 9 “Confidential Reports” of IRSA Employees (Service) Regulations-1999 updated - July 2025.
3. In case of vacant post of RO, CO, SCO, the next RO, CO & SCO shall responsible to finalize the ACRs.

**INSTRUCTION FOR THE REPORTING OFFICER**

1. Assessment be made in comparison with others equal appointment and comparable qualifications.
2. No part of the assessment by any Reporting Officer will be shown or communicated in writing to the Officer/Official Reported upon except that in case of an adverse report, complete assessment will be shown/communicated to the Reported Officers.
3. Annual Confidential Report (ACR) shall be duly filled and dispatched to the Reporting Officer (RO) not later than 15th of January of every year. The RO shall forward the report to the Countersigning Officer (CO) within two weeks of its receipt. The Countersigning Officers shall then finalize their comments within two weeks of the receipt of ACRs.

**INSTRUCTION FOR THE COUNTERSIGNING OFFICER**

1. The Countersigning Officer to report on the aspects not touched upon by the Reporting Officer. If you disagree to the rating by the Reporting Officer, you may highlight the difference of opinion with justification. You should also indicate how frequently you have seen work of the Officer/Official Reported upon. If the Officer has been assessed fit for promotion, would you be prepared to accept him in the higher grade? If no, please give your reasons.
2. Overall assessment and the remarks, which are accepted and considered as adverse, may be underlined in red, if you are the highest reporting officer or it may be indicated that such remarks may be communicated as advisory.
3. The Countersigning Officers should make an unbiased evaluation of the quality of performance evaluation made by the RO by categorizing the reports as exaggerated, fair or biased. This would evoke a greater sense of responsibility from the Reporting Officers.
4. The Countersigning Officers should weigh the remarks of the RO against their personal knowledge of the Officer under report and then give their assessment. In case of disagreement, the Countersigning Officers should give specific reasons, if the Countersigning Officers differ with the grading or remarks given by the Reporting Officer, they should score it/them out and give their own grading by initialing the appropriate box.
5. The Countersigning Officers should underline, in red ink, remarks which in their opinion are adverse and should be communicated to the Officer/Official reported upon. All adverse remarks whether remediable or irremediable should be communicated to the Officer/Official reported upon, with a copy of communication placed in the Confidential Report Dossier. Reporting Officers should ensure that proper counseling is given to the Officer under report before adverse remarks are recorded.
6. The Reporting and Countersigning Officers should be clear, direct, objective and unambiguous in their remarks. Vague impressions, based on inadequate knowledge or isolated incidents, should be avoided.
7. The reports initiated by the Chairman shall be treated as final for officers in BS-20 and their members of staff.
8. The reports initiated by Member(s), IRSA shall be treated as final for their members of staff.
9. The Countersigning Officers shall then finalize their comments within two weeks of the receipt of ACRs and will be responsible to send to the Officer declared for safe custody of ACRs, as per IRSA Regulations.