

UNIVERSITY OF POONCH RAWALAKOT

ANNUAL REVIEW REPORT



Reporting Period: _____

Name of candidate: _____

Designation: _____

Name of Department: _____

Name of Faculty: _____

UNIVERSITY OF POONCH RAWALAKOT

TABLE OF CONTENTS

Sr. No.	Details	Page No.
PROFORMA FOR ANNUAL REVIEW OF TTS FACULTY MEMBERS		
1.0 PERSONAL		
1.1	Offer letters and joining reports	
1.2	Academic qualifications	
2.0 EVALUATION REFERENCE		
2.1	Teaching load	
2.2	Student's evaluation	
2.3	Research work supervised	
2.4	Contribution to curriculum development	
2.5	Own/ Joint research work published	
2.6	Research projects	
2.7	Conference/ Seminars/ Workshops attended/ organized	
2.8	Involvement in departmental/ Faculty activities of parent and other universities	



University of Poonch Rawalakot (Registrar Office)

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PROFORMA FOR ANNUAL REVIEW OF TTS FACULTY MEMBERS (Under Tenure Track System of Higher Education Commission of Pakistan) Reporting Period: (Twelve months starting from the date of first appointment)

Part-1: To be filled by Faculty Member				
1.0 Personal				
1.1	Name of Faculty member in Block Letters:			Page No.
1.2	Position:			
1.3	Date of Joining on TTS:			
1.4	Department:			
1.5	Specialization:			
1.6	Faculty:			
1.7	Telephone No. (Home): Mobile:			
1.8	Email address:			
1.9	Academic Qualifications: (Starting form highest qualification)			
	Degree	University	Subject	Year
1.91				
1.92				
1.93				

Part-2: Parameters of Evaluation

2.0 Evaluation Reference

2.1		Teaching Load					Page No.
Semester	Title of Course(s) Taught	Credit Hours	Level: (Bachelor/ Master/MS/ PhD)	Campus	No of Students		
2.1.1	Fall: (Year)						
2.1.2	Spring: (Year)						
2.2		Student's Evaluation					Page No.
2.2.1	Excellent	Very Good	Good	Satisfactory	Unsatisfactory		
2.3		Research Work Supervision (current semester only)					Page No.
2.3.1	Names of MS./M.Phil. students under supervision						
2.3.2	Names of PhD Students Supervising						
2.3.3	Name of MS/M.Phil. students' supervision completed			Thesis Title:			
2.3.4	Names of PhD. students supervision completed			Thesis Title:			
2.4		Contribution to Curriculum Development					Page No.
2.4.1	Course Units Written/Developed						
2.4.2	Course Units Reviewed/Revised						
2.4.3	Preparation of Supplementary materials for students						
2.5		Individual/ Joint Research Work Published					Page No.
2.5.1	Research Papers published in impact factor journals (Name of journal, impact factor, etc.)						
2.5.2	Research Papers published in HEC approved journals (Name of journal, category)						
2.5.3	Research Papers submitted in journals (Name of journal, impact factor, etc.)						
2.5.4	Books/Chapter published (title, publishers)/ Research Papers published in National/ International conference proceedings						
2.5.5	Books/Chapters/Articles reviewed						
2.5.6	Patents Registered						

2.6	Research Projects								Page No.
2.6.1	Research Project Completed (Funding Agency, Cost)								
2.6.2	Research Project in Progress (Funding Agency, Cost)								
2.6.3	Research Project Submitted (Funding Agency, Cost)								
2.7	Conference/Seminars/ Workshops attended/organized/ presentations								Page No.
	Presentations								
2.7.1	Title of Conferences/ Attended	Venue	Nature of Participation	Dates of Event	Funding Agency	Name of Organizing Agency	Paper Presented	Conference Paper Published in Proceedings	
2.7.1.1									
2.7.1.2									
2.7.1.3									
Seminars/Workshops Attended									Page No.
2.7.2	Title of Seminars/ Workshops Attended	Venue	Nature of Participation	Dates of Event	Name of Organizing Agency	Funding Agency			
2.7.2.1									
2.7.2.2									
2.7.2.3									
Conferences/Seminars/Workshops Organized									Page No.
2.7.3.	Title of Conference/ Seminars/ Workshops Organized	Venue	Nature of Participation	Dates of Event	Name of Organizing Agency	Funding Agency			
2.7.3.1									
2.7.3.2									
2.7.3.3									
2.8	Involvement in Departmental/ Faculty activities of Parent and other Universities								Page No.
2.8.1	Involvement in Departmental / Faculty activities								
2.8.2	Services for Departments of other Universities								

Signature of the Applicant: _____

Name: _____

Designation: _____

Date: _____



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Annual Review of Faculty Member working under Tenure Track System of Higher Education Commission of Pakistan

S. No.	Evaluation by Departmental Tenure Review Committee Members					Total Points	Points Earned		
1	Name of Faculty member								
2	His/ Her Position								
3	Period to be Evaluated								
4	Major Role in Department		Teaching (2)	Supervision (1)	Administration (1)	04			
5	Teaching Load:		Fall Semester: (10) Courses with code:	Spring Semester: (10) Courses with code:	Teaching Load Calculations: Assistant Professor = $\frac{\text{Actual Load}}{18} \times 20$ Associate Professor = $\frac{\text{Actual Load}}{12} \times 20$ Professor = $\frac{\text{Actual Load}}{12} \times 20$	20			
6	Students' Evaluation		Excellent (10)	Very Good (8)	Good (5)	Satisfactory (3)	Unsatisfactory (0)	10	
7	Research Work Supervised		M.Phil./MS Thesis under Supervision: (4) (2 marks for each M. Phil/ MS thesis under supervision)	M.Phil./MS Thesis Completed: (6) 6-16* (3 marks for each M. Phil/ MS Thesis completed)	Ph.D. Thesis under Supervision/Completed: (10) 0-10 (5 marks for each Ph. D thesis under supervision / completed)	20			
8	Contribution to Curriculum Development		Course units Written/Developed (1)	Course Units Reviewed/Revised (1)	Provided Supplementary Material for Students (1)	03			
9	Research Work Published (As per HEC Criteria)		Articles Published (15) W-cat= 7.5 for each Publication X-cat= 5 for each Publication Y-cat= 3 for each Publication	Books/Chapter (1)	Books/ Chapters/ Articles Reviewed (1)	Patents obtained/ Creative Work (3)	20		
10	Research Projects		Completed (5)		In Progress (5)	10			
11	Conference/Seminars/ Workshops attended/organized/Presentation		National/International Level Conferences Attended (2)	Paper Presented at National/ International Level Conferences (3)	Seminar/ Workshops Attended (2)	Conferences/Seminar s/ Workshops Organized (1)	08		
12	Involvement in Departmental/ Faculty activities of Parent and other Universities		Member of Departmental/Faculty Committees of Parent University (3)		Services to other Departments/ Other Universities (2)	05			
Total Points Earned:						100			

Name & Designation of Chairman/Dean: _____ Institution: _____
Signature & Official Stamp: _____ Date: _____

Note: * 06 marks shall be allocated if the department is offering Ph. D program and 16 marks shall be allocated if the department is not offering Ph. D program



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**PPEPROFORMA FOR OBTAINING OPINION OF THE MEMBER OF DEPARTMENTAL TENURE REVIEW
COMMITTEE (DTRC) MEMBER FOR ANNUAL PERFORMANCE OF TTS FACULTY MEMBER**

A) Basic information regarding the applicant (To be filled by the Registrar office)					
a) Full name of candidate:					
b) Institution:					
c) Reporting period:					
B) Opinion of the Reviewer: (To be filled by the DTRC member) <i>Please Tick any one:</i>					
Score achieved from <i>Annexure I</i>	<50 %	50-60 %	61-70 %	71-80 %	81-100 %
Recommendations	Unsatisfactory	Satisfactory	Good	Very Good	Excellent
Brief comments on the strength/weaknesses of the faculty member and basis of recommendation being made:					
C) Personal Information of the Reviewer: (To be filled by the DTRC Member)					
Name: _____		Designation: _____			
Field of study: _____		Academic		position: _____	
Institution & postal/official Address: _____					
Phone # _____			Email ID: _____		
Declaration: This is to certify that the undersigned has evaluated the dossier of the candidate, stated above, with dedication and professional honesty without any personal/professional prejudice and biasness.					
Date: _____		Signature with Official Stamp: _____			