

K.S. School of Engineering and Management ,Bangalore – 560109

Appraisal Form for Support Staff Including Office Staff

2018 -2019

1.	Name	B.N.SATISH				Date of Birth	
						03/10/1972	
2.	Designation and Department	FOREMAN – MECHANICAL ENGINEERING DEPARTMENT					
3.	Date of Joining KSSEM	01-06-2016					
4.	Salary as on Oct 2018	Basic	23400	Total Emoluments	36102		
		Educational Qualification					
5.	Education	Specialisation	Year of	Class	College/Institute	University	
	SSLC		1989	11	A P S	SSLC. KARNATAKA	
	PUC						
	ITI/JOC						
	DIPLOMA	MECHANICAL	1992	I	P E S ,BENGALORE	D T E	
	DEGREE	(B.E) MECHANICAL			RVCE	B U	
	Others						
6.	Work Experience: (Chronological Order)						
	Position	Institute/Industry			From - To	Total Service (Year and	
	ASST. TEACHING	K . S. POLYTECHNIC			1992DEC -1998	6YEARS	
	FOREMAN	K.S.I.T			1 st OCT2000-31-05-2016	15YEARS 5MONTHS	
	FOREMAN	K.S.S.E.M			1-06-2016 –TILL DATE	3YEARS 7MONTHS	
7.	Computer Skill						
	Sl. No.	Software		Poor	Good	Excellent	
	1	MS WORD			YES		
	2	EXCEL			YES		
	3	POWER POINT			YES		
4	Others (software)			AUTO CAD/SOLID EDGE/ CADEM			

Workshops /Training Programs Attended during the Assessment Year					
TOPIC		Place	Date / Number of Days		
8.	FIRE SECURITY		MSRIT 2DAYS		
	RECENT TREND IN INDUSTRY		BMS 5DAYS		
Industry Visited Accompanying Students (if any)					
9.	Name of the Industry/Place		Date / Number of Days		
	ISRO/ HAL/NAL		EACH 1DAY		
Assigned Responsibilities					
10.	Sl. No	Lab	Semester	Duration	
	1	BASIC WORKSHOP	I/II	Almost every	
	2	Computer graphics drawing	i/ii	Almost every	
	3	Material testing lab	3sem	Almost every	
	4	Foundry forging lab	3sem	10times	
	5	Machine shop	4sem	10times	
	6	Mechanical measurement & Metrology	4sem	10times	
	7	Fluid mechanics & machinery	5sem	10times	
	8	Energy lab	5sem	8times	
	9	Design lab	7sem	4times	
	10	Cim lab	7sem	2times	
	11	All Departments Works			
11.	Communication Skill				
	Language		Poor	Average	Good
	English				yes
	Kannada				yes
	Hindi				yes
	Others(specify) telugu/tamil				yes
10	Sl. No.	Special Achievements/Awards (If any)			
	1	Undergone training at foreman training Institute/worked for industries in drafting manual and computer / Teaching for Diploma class			
	2				
	3				

Declaration

I declare that above information provided by me is true to my knowledge. I take the complete ownership of all information furnished above and if any of this information is found to be false, suitable action can be initiated.

B.N. Satish
17/7/19.

Signature of Non-Teaching Faculty with Date

(Attach copies of documents in support of information provided herein)

Endorsement of Lab-in-Charge / Office Manager

I have filled in the above details in consultation with the concerned employee and I endorse the details furnished above. In my personal opinion the performance of this employee is: (Tick Appropriate Box)

Poor	Needs Improvement	Satisfactory	Good	<input checked="" type="checkbox"/> Excellent
------	-------------------	--------------	------	---

Name: *B.N. Satish*

Designation: *Foseman*

Signature of Lab-in-charge / Office Manager with date

Observations and Recommendation by Head of the Department

According to my observation the Foseman of Mechanical department MS. B.N. Satish is fully involving with departmental activities in all respects and he is satisfying all needs.

These observations are brought to the notice of concerned Non-Teaching Faculty

Signature of HOD with date

Cheladi S. 17/9/2019

Professor & Head
Department Of Mechanical Engineer
K.S. Group Of Institutions
K.S. School Of Engineering & Management
Bangalore-560 109

I have noted the observations made herein / I differ in my opinion (Explain)

A. S. Wani
17/9/19.

Signature of Non-Teaching Faculty with date

K. Rama G
Dr. K. RAMA NARASIMHA
Principal/Director
K S School of Engineering and Management
Bengaluru - 560 109

K.S. School of Engineering and Management

Bangalore – 560109

Appraisal Form for Support Staff Including Office Staff

2018 -2019

1	Name	SHRUTHI B L			Date of Birth	
					30/11/1994	
2	Designation and Department	LAB INSTRUCTOR, MECHANICAL ENGINEERING				
3	Date of Joining KSSEM	09/03/2017				
4	Salary as on Oct 2018	Basic	3250	Total Emoluments	13000/-	
		Educational Qualification				
5	Education	Specialisation	Year of Passing	Class	College/Institute	University
	SSLC		2010	FC	Sri Siddarameshwara Junior College Bevoor	KSEEB
	DIPLOMA	ME	2013	FCD	Govt. polytechnic Channapattana	DTE
	DEGREE	ME	2016	FCD	Ghousia College Of Engineering Ramanagara	VTU
6	Work Experience: (Chronological Order)					
	Position	Institute/Industry		From - To	Total Service (Year and Month)	
	LAB INSTRUCTOR	K S SCHOOL OF ENGINEERING AND MANAGEMENT		09/03/2017-TILL DATE	2 YEARS (9 MONTHS)	
7	Computer Skill					
	Sl. No.	Software	Poor	Good	Excellent	
	1	MS WORD			✓	
	2	EXCEL			✓	
	3	POWER POINT			✓	
4	Others (software)			✓		
8	Workshops /Training Programs Attended during the Assessment Year					
	TOPIC		Place		Date / Number of Days	
	LABORATORY RECORD MAINTANANCE & WORK ETHICS		SJB INSTITUTE OF TECHNOLOGY		3rd to 5th JAN 2019/ 03 DAYS	

Industry Visited Accompanying Students (if any)					
9	Name of the Industry/Place			Date / Number of Days	
	Nil			Nil	
Assigned Responsibilities					
10	Sl. No	Lab	Semester	Duration	
	1	EGDL	1 st		
	2	CAMA	6 th		
	3	CIM	7 th		
	4	CAMD	3 rd		
	5	NACC Work for Criteria 2 nd , 3 rd , 6 th			
	6	Department Work			
	7				
11	Communication Skill				
		Language	Poor	Average	Good
		English			✓
		Kannada			✓
		Hindi	✓		
		Others(specify) ✎	✓		
10	Sl. No.	Special Achievements/Awards (If any)			
	1				
	2				
	3				

Declaration

I declare that above information provided by me is true to my knowledge. I take the complete ownership of all information furnished above and if any of this information is found to be false, suitable action can be initiated.

Shruthi B.L 17/07/2019

Signature of Non-Teaching Faculty with Date

(Attach copies of documents in support of information provided herein)

Endorsement of Lab-in-Charge / Office Manager

I have filled in the above details in consultation with the concerned employee and I endorse the details furnished above. In my personal opinion the performance of this employee is: (Tick Appropriate Box)

Poor	Needs Improvement	Satisfactory	Good ✓	Excellent
------	-------------------	--------------	--------	-----------

Name: B.N. SATISH

Designation: Foreman

Shruthi
Signature of Lab-in-charge / Office Manager with date

Observations and Recommendation by Head of the Department

Her involvement with department is Excellent.

These observations are brought to the notice of concerned Non-Teaching Faculty

Signature of HOD with date

Shruthi B.L 17/7/19

I have noted the observations made herein / I differ in my opinion (Explain)

Shruthi B.L 17/07/2019
Signature of Non-Teaching Faculty with date

Shruthi B.L 17/7/19
Professor & Head
Department Of Mechanical Engineer
K.S. Group Of Institutions
K.S. School Of Engineering & Manager
Bangalore-560 109

K. Rama
Dr. K. RAMA NARASIMHA
Principal/Director
K S School of Engineering and Manager
Bangalore

K.S. School of Engineering and Management

Bangalore – 560109

Appraisal Form for Support Staff Including Office Staff

2018 -2019

1	Name	E-LOKESH			Date of Birth	
					05/04/1992	
2	Designation and Department	TECHNICIAN/ MECHANICAL ENGINEERING				
3	Date of Joining KSSEM	27/07/2010				
4	Salary as on Oct 2018	Basic	7625	Total Emoluments	15703	
5	Educational Qualification					
	Education	Specialisation	Year of Passing	Class	College/Institute	University
	SSLC		2007	SC	ZP HIGH SCHOOL	APBSE
	PUC					
	ITI/JOC		2009	FC	SRI RAM ITI	DET
	DIPLOMA					
	DEGREE					
	Others					
6	Work Experience: (Chronological Order)					
	Position	Institute/Industry		From - To	Total Service (Year and Months)	
	TECHNICIAN	K S SCHOOL OF ENGINEERIN & MANAGEMENT		27/07/2010 TO TILL DATE	9 YEARS (5 MONTHS)	
7.	Computer Skill					
	Sl. No.	Software	Poor	Good	Excellent	
	1	MS WORD	✓			
	2	EXCEL	✓			
	3	POWER POINT	✓			

	4	Others (software)	✓		
Workshops /Training Programs Attended during the Assessment Year					
8	TOPIC		Place	Date / Number of Days	
	Laboratory Record Maintenance and work ethics		SJB Institute Of Technology	3/1/19- 5/1/19	
Industry Visited Accompanying Students (if any)					
9	Name of the Industry/Place			Date / Number of Days	
Assigned Responsibilities					
10	Sl. No	Lab	Semester	Duration	
	1	WORK SHOP LAB	1 ST & 2 ND		
	2	FOUNDRY & FORGING LAB	3 RD		
	3	MMM LAB	4 TH		
	4	DESIGN LAB	7 TH		
	5	NACC (CRITERIA -5 th ,2 nd)			
	6				
	7				
11	Communication Skill				
	Language	Poor	Average	Good	
	English		✓		
	Kannada			✓	
	Hindi	✓			
	Others(specify)	<i>Telugu</i> <i>Tamil</i>		✓	
10	Sl. No.	Special Achievements/Awards (If any)			
	1				
	2				
	3				

Declaration

I declare that above information provided by me is true to my knowledge. I take the complete ownership of all information furnished above and if any of this information is found to be false, suitable action can be initiated.

Manish 17/07/19
Signature of Non-Teaching Faculty with Date

(Attach copies of documents in support of information provided herein)

Endorsement of Lab-in-Charge / Office Manager

I have filled in the above details in consultation with the concerned employee and I endorse the details furnished above. In my personal opinion the performance of this employee is: (Tick Appropriate Box)

Poor	Needs Improvement	Satisfactory	Good ✓	Excellent
------	-------------------	--------------	--------	-----------

Name: B. N. SATHI
Designation: Foreman
Manish
Signature of Lab-in-charge / Office Manager with date

Observations and Recommendation by Head of the Department

His involvement with department is good and needs to improve on system side.

Chandrashekar, 17/7/19
Professor & Head

These observations are brought to the notice of concerned Non-Teaching Faculty
**Department Of Mechanical Engineering
K.S. Group Of Institutions
K.S. School Of Engineering & Management
Bangalore-560 109**

Signature of HOD with date
Chandrashekar, 17/7/19

I have noted the observations made herein / I differ in my opinion (Explain)

Manish 17/07/19
Signature of Non-Teaching Faculty with date

Dr. K. Rama
Dr. K. RAMA NARASIMHA
Principal/Director
K S School of Engineering and Management
Bengaluru - 560 109

K.S. School of Engineering and Management

Bangalore – 560109

Appraisal Form for Support Staff Including Office Staff

2018 -2019

1	Name	CHANDU D			Date of Birth	29/11/1990
2	Designation and Department	Technician/Mechanical				
3	Date of Joining KSSEM	16/08/2012				
4	Salary as on Oct 2018	Basic	6950	Total Emoluments	15034	
Educational Qualification						
5	Education	Specialisation	Year of Passing	Class	College/Institute	University
	SSLC		2007	SC	Vikas high school	KSEEB
	DIPLOMA		2011	Course completed	K S POLYTECHNIC	DTE
Work Experience: (Chronological Order)						
6	Position	Institute/Industry		From - To	Total Service (Year and)	
	MECHANIC	Kaveri Ford		Nov 2011-Feb 2012	4 months	
	Service advisor	Apple auto(Suzuki)		Mar 2012-Aug 2012	6 months	
	Technician	KSSEM		16/08/2012-till date	7 years-4 months	
7. Computer Skill						
	Sl. No.	Software	Poor	Good	Excellent	
	1	MS WORD	✓			
	2	EXCEL	✓			
	3	POWER POINT	✓			
	4	Others (software)	✓			
Workshops /Training Programs Attended during the Assessment Year						
8	TOPIC		Place		Date / Number of Days	
	Laboratory Record Maintenance and work ethics		SJB Institute Of Technology		3/1/19- 5/1/19	

9	Industry Visited Accompanying Students (if any)		
	Name of the Industry/Place		Date / Number of Days
10	Assigned Responsibilities		
	Sl. No	Lab	Semester
	1	Work shop practice	1 st & 2 ^{Nnd}
	2	Foundry & forging	3
	3	FM Lab	4 th & 5 th
	4		
	5		
	6		
	7		
11	Communication Skill		
	Language	Poor	Average
	English		✓
	Kannada		✓
	Hindi	✓	
	Others(specify) <i>Telugu</i>		✓
10	Sl. No.	Special Achievements/Awards (If any)	
	1		
	2		
	3		

Declaration

I declare that above information provided by me is true to my knowledge. I take the complete ownership of all information furnished above and if any of this information is found to be false, suitable action can be initiated.

D. Chandu 17-07-19

Signature of Non-Teaching Faculty with Date

(Attach copies of documents in support of information provided herein)

Endorsement of Lab-in-Charge / Office Manager

I have filled in the above details in consultation with the concerned employee and I endorse the details furnished above. In my personal opinion the performance of this employee is: (Tick Appropriate Box)

Poor	Needs Improvement	Satisfactory	Good ✓	Excellent
------	-------------------	--------------	--------	-----------

Name: B.N. SATISH

Designation: Foreman

Signature of Lab-in-charge / Office Manager with date

Observations and Recommendation by Head of the Department

His involvement towards department is good and suggested to involve with different laboratories.

Chandu K. 17/7/19

These observations are brought to the notice of concerned Non-Teaching Faculty

Signature of HOD with date

Chandu K. 17/7/19

Professor & Head
Department Of Mechanical Engineering
K.S. Group Of Institutions
K.S. School Of Engineering & Management
Bangalore-560 109

I have noted the observations made herein / I differ in my opinion (Explain)

Signature of Non-Teaching Faculty with date

D. Chandu 17-07-19

K. Rama

Dr. K. RAMA NARASIMHA
Principal/Director
K S School of Engineering and Management
Bengaluru - 560 109

K.S. School of Engineering and Management

Bangalore – 560109

Appraisal Form for Support Staff Including Office Staff

2018 -2019

1	Name		CHETAN S C			Date of Birth	
						31/10/1976	
2	Designation and Department		TECHNICIAN/ MECHANICAL				
3	Date of Joining KSSEM		06/08/2016				
4	Salary as on Oct 2018		Basic	3250	Total Emoluments		12000
5	Educational Qualification						
	Education	Specialisation	Year of Passing	Class	College/Institute	University	
	SSLC		1993	2ND		KSEEB	
	PUC						
	ITI/JOC		1995	2ND		GOVT	
	DIPLOMA						
	DEGREE						
	Others						
6	Work Experience: (Chronological Order)						
	Position		Institute/Industry		From - To		Total Service (Year and
	FITTER/TURNER		JAGBAL INDUSTRIES		1995/2005		10
	TURNER/MILLING		MINI MACHINE TOOLS		2005/2015		10
7.	Computer Skill						
	Sl. No.	Software		Poor	Good	Excellent	
	1	MS WORD		✓			
	2	EXCEL		✓			
	3	POWER POINT		✓			
	4	Others (software)		✓			

Workshops /Training Programs Attended during the Assessment Year				
8	TOPIC		Place	Date / Number of Days
	Laboratory Record Maintenance and work ethics		SJB Institute Of Technology	3/1/19- 5/1/19
9	Industry Visited Accompanying Students (if any)			
	Name of the Industry/Place		Date / Number of Days	
10	Assigned Responsibilities			
	Sl. No	Lab	Semester	Duration
	1	Machine shop	4	
	2	FM	5	
	3			
	4			
	5			
	6			
	7			
11	Communication Skill			
	Language	Poor	Average	Good
	English	✓		
	Kannada			✓
	Hindi	✓		
	Others(specify)	✓		
10	Sl. No.	Special Achievements/Awards (If any)		
	1			
	2			
	3			

Declaration

I declare that above information provided by me is true to my knowledge. I take the complete ownership of all information furnished above and if any of this information is found to be false, suitable action can be initiated.

Chetan S.C 17/07/2019
Signature of Non-Teaching Faculty with Date

(Attach copies of documents in support of information provided herein)

Endorsement of Lab-in-Charge / Office Manager

I have filled in the above details in consultation with the concerned employee and I endorse the details furnished above. In my personal opinion the performance of this employee is: (Tick Appropriate Box)

Poor	Needs Improvement	Satisfactory <input checked="" type="checkbox"/>	Good	Excellent
------	-------------------	--	------	-----------

Name: *B.N.SATISH*

Designation: *Foreman*

A. Shrin
Signature of Lab-in-charge / Office Manager with date

Observations and Recommendation by Head of the Department

His involvement with department is satisfactory but suggested to know the knowledge of different laboratories.

These observations are brought to the notice of concerned Non-Teaching Faculty

Signature of HOD with date

Chetan S.C. 17/7/19

I have noted the observations made herein / I differ in my opinion (Explain)

Chetan S.C 17/07/19
Signature of Non-Teaching Faculty with date

Chetan S.C. 17/7/19

Professor & Head
Department Of Mechanical Engineering
K.S. Group Of Institutions
K.S. School Of Engineering & Management
Bangalore-560 109

K. Rama
Dr. K. RAMA NARASIMHA

Principal/Director
K S School of Engineering and Management
Bengaluru - 560 109

K.S. School of Engineering and Management

Bangalore – 560109

Appraisal Form for Support Staff Including Office Staff

2018-2019

1	Name	SEENA T V				Date of Birth	
						04/09/1979	
2	Designation and Department	Fitter /Mechanical					
3	Date of Joining KSSEM	19/01/2015					
4	Salary as on Oct 2018	Basic	2500	Total Emoluments		10000	
		Educational Qualification					
5	Education	Specialisation	Year of Passing	Class	College/Institute	University	
	SSLC		1996	SC	GJCHS	KSEEB	
	PUC						
	ITI/JOC						
	DIPLOMA						
	DEGREE						
	Others						
6	Work Experience: (Chronological Order)						
	Position	Institute/Industry			From - To	Total Service (Year and	
	Sales	Auto parts			1996-1999	3 years	
	Fitter	Exel die casters			1999-2007	8 years	
	Technician	ATMA			2007-2010	3 years	
	Sales	Food Products			2010-2015	5 years	
	Fitter	KSSEM			19/01/2015 to till date	5 years	
7.	Computer Skill						
	Sl. No.	Software		Poor	Good	Excellent	
	1	MS WORD		✓			
	2	EXCEL		✓			
	3	POWER POINT		✓			
4	Others (software)		✓				

Workshops /Training Programs Attended during the Assessment Year				
8	TOPIC		Date / Number of Days	
	Workshop practice lab		JSSATE 27/1/15 -28/1/15	
	Laboratory Record Maintenance and work ethics		SJB Institute Of Technology 3/1/19- 5/1/19	
Industry Visited Accompanying Students (if any)				
9	Name of the Industry/Place		Date / Number of Days	
Assigned Responsibilities				
10	Sl. No	Lab	Semester	Duration
	1	Work shop practice	1 st & 2 nd	
	2	Energy lab	5	
	3	HMT	6	
	4			
	5			
	6			
	7			
11	Communication Skill			
	Language	Poor	Average	Good
	English		✓	
	Kannada			✓
	Hindi		✓	
	Others(specify) *Telugu*		✓	
10	Sl. No.	Special Achievements/Awards (If any)		
	1			
	2			
	3			

Declaration

I declare that above information provided by me is true to my knowledge. I take the complete ownership of all information furnished above and if any of this information is found to be false, suitable action can be initiated.

Sesari V 17/07/19

Signature of Non-Teaching Faculty with Date

(Attach copies of documents in support of information provided herein)

Endorsement of Lab-in-Charge / Office Manager

I have filled in the above details in consultation with the concerned employee and I endorse the details furnished above. In my personal opinion the performance of this employee is: (Tick Appropriate Box)

Poor	Needs Improvement	Satisfactory	Good <input checked="" type="checkbox"/>	Excellent
------	-------------------	--------------	--	-----------

Name: *B. N. SATKHA*

Designation: *Foreman*

A. M. S.
Signature of Lab-in-charge / Office Manager with date

Observations and Recommendation by Head of the Department

He is involving with all departmental activities & his performance is good. Suggested to upgrade his qualification.

Chalaw: R. 17/7/19

These observations are brought to the notice of concerned Non-Teaching Faculty

Signature of HOD with date

Chalaw: R. 17/7/19

Professor & Head
Department Of Mechanical Engineering
K.S. Group Of Institutions
K.S. School Of Engineering & Management
Bangalore-560 109

I have noted the observations made herein / I differ in my opinion (Explain)

Sesari V 17/07/19
Signature of Non-Teaching Faculty with date

K. Rama
Dr. K. RAMA NARASIMHA
Principal/Director

K S School of Engineering and Management
Bengaluru - 560 109

K.S. School of Engineering and Management Bangalore – 560109

Appraisal Form for Support Staff Including Office Staff

2018 -2019

1	Name	MOHAN KUMAR.M			Date of Birth	
					20-07-1968	
2	Designation and Department	LAB TECHNICIAN MECHANICAL				
3	Date of Joining KSSEM	13-09-2017				
4	Salary as on Oct 2018	Basic	3500	Total Emoluments	14000	
5	Educational Qualification					
	Education	Specialisation	Year of	Class	College/Institute	University
	SSLC		1984	SC	HULIHALLI CHIKKAMALLIAH GANGAMMA COMPOSIT JUNIOR.COLLAGE	KSEEB
	PUC					
	ITI/JOC	ITI(TURNER)	1987	1 ST CLASS 69%	GOVT ITI. TUMKUR DIST.	
Others	APPRENTICEE (NCTVT)	1989	1 ST CLASS (70%)	FOURSES ENGINEERING (INDIA)PYT LTD		
6	Work Experience: (Chronological Order)					
	Position	Institute/Industry		From - To	Total Service (Year and	
	GRINDING AND MACHINE SHOP OPERATOR	REWDALE PRECISION TOOLS PVT LTD PEENYA BANGALORE.		OCT 1989 TO MAY 1996	7 YEARS 6MONTH.	
	TURNER TOOL ROOM	CENTURA WATCH CASE PVT LTD TUMKUR.		JUNE 1987 TO 2000	3YEARS 6 MONTH	
	TURNER AND FITTER	SUMAN CONTROLS PVT LTD BANGALORE.		2000TO 2002	2YEARS	
	CNC TURNING OPERATOR.	MESH TRANS GEARS PVT LTD BANGALORE		OCT 2002 TO APR 2003	6 MONTH.	
	CNC OPERATOR SETTER. PROGRAMMER Q.C	SEAROCK PRECISION TOOLS PVT LTD. BANGALORE.		MAY 2003 TO 2014	11YEARS 3MONTH.	
	CNC PROGRAMMER Q.C ENGINEER	BEST YOUNG AND ENGINEERING PVT LTD.		SEP 2014TOMAR 2015	5 MONTH.	

	V.M.C OPERATOR SETTER PROGRAMMER.	SREEDHAN AUTO MACHINE PVT LTD BANGALORE.	JAN 2015TOMAR 2016	1 YEAR 2 MONTH.	
	H.BORING MACHINE OPERATOR PRODUCTION SUPERVISOR	S.P.M. LTD BANGALORE.	JULY 2016TOMAY 2017.	11MONTHS.	
	TECHNICIAN	K.S.S.E.M	13SEP2017 TO TILL DATE	2YEARS 2MONTHS	
7.	Computer Skill				
	Sl. No.	Software	Poor	Good	Excellent
	1	MS WORD		✓	
	2	EXCEL			
	3	POWER POINT			
4	Others (software)		✓		
8.	Workshops /Training Programs Attended during the Assessment Year				
	TOPIC		Place	Date / Number of Days	
9	Industry Visited Accompanying Students (if any)				
	Name of the Industry/Place		Date / Number of Days		
	A C E DESIGNERS PVT LTD PEENYA.		01 DAY.		
10	Assigned Responsibilities				
	Sl. No	Lab	Semester	Duration	
	1	CIM	7 TH		
	2	MACHINE SHOP	4 TH		
	3	WORK SHOP	1 ST AND 2 ND SEM		
	4	CAMD			
5	CAED				
11	Communication Skill				
	Language		Poor	Average	Good
	English			✓	
	Kannada				✓
	Hindi		✓		
Others(specify)		✓			

10	Sl. No.	Special Achievements/Awards (If any)
	1	ISO CERTIFICATE INDUSTRIAL GROOP SEMINAR AWARD.
	2	

Declaration

I declare that above information provided by me is true to my knowledge. I take the complete ownership of all information furnished above and if any of this information is found to be false, suitable action can be initiated.

Moh 17/07/2019.

Signature of Non-Teaching Faculty with Date

(Attach copies of documents in support of information provided herein)

Endorsement of Lab-in-Charge / Office Manager

I have filled in the above details in consultation with the concerned employee and I endorse the details furnished above. In my personal opinion the performance of this employee is: (Tick Appropriate Box)

Poor	Needs Improvement	Satisfactory ✓	Good	Excellent
------	-------------------	-------------------	------	-----------

Name: B. N. SATISH

Designation: Foreman

K. N. S.
Signature of Lab-in-charge / Office Manager with date

Observations and Recommendation by Head of the Department

Suggested to involve voluntarily department activities.

These observations are brought to the notice of concerned Non-Teaching Faculty

Chelw: R. 17/7/19

Professor & Head
Department Of Mechanical Engineering
K.S. Group Of Institutions
K.S. School Of Engineering & Management
Bangalore-560 109

Signature of HOD with date

Chelw: R. 17/7/19

I have noted the observations made herein / I differ in my opinion (Explain)

Moh 17/7/19.

Signature of Non-Teaching Faculty with date

K. Rama
Dr. K. RAMA NARASIMHA
Principal/Director
K S School of Engineering and Management
Bangaluru - 560 109