**USMANU DANFODIYO UNIVERSITY, SOKOTO**

(Office of the Registrar, Directorate of Human Resources)



**FORM FOR EVALUATION AND PROMOTION**

(For Senior Non-Academic Staff)

**PART 1: To be completed by staff member**

**File No.:**

**GSM.: Session:** \_\_\_\_\_\_\_\_\_\_\_

**Institutional Email: Alternate Email:**

1. **STAFF DATA**

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(Surname)***

2. Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Current Duty Post: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Date, Rank and Grade Level on first Appointment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Date, Rank and Grade Level/Step: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Date, Rank and Grade Level on Last Promotion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Change of Cadre and Date (if Any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Date of Confirmation of Appointment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Rank being applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. QUALIFICATIONS:**

1. Academic and Professional

|  |  |  |
| --- | --- | --- |
| Degree/Diplomas/Certificates | Institutions | Date of Award |
|  |  |  |
|  |  |  |
|  |  |  |

**C. SHORT OURSES**

|  |  |  |  |
| --- | --- | --- | --- |
| **Title of Course** | **Organizers** | **Venue** | **Date (From...........to.......)** |
|  |  |  |  |

**D. WORKING EXPERIENCE**

|  |  |  |
| --- | --- | --- |
| **Institution** | **Designation** | **Duration**  **(From................to.................)** |
|  |  |  |

**E. OTHER PUBLIC ACTIVITIES (Please indicate dates)**

List all other activities other than your normal University work such as membership of Committee appointed by the University or other public organizations the experience of which you consider relevant and important to your duty. etc (Please indicate Dates).

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Signature of Staff Member Date

**PART II:**

A. **EVALUATION (To be completed by Head of Division /Unit)**

|  |  |  |  |
| --- | --- | --- | --- |
| S/N | Assessment | Points | Scores |
| 1 | Foresight and Initiative | 6 |  |
| 2 | Judgment | 5 |  |
| 3 | Expression on paper | 7 |  |
| 4 | Relationship with Colleagues | 5 |  |
| 5 | Acceptance of Responsibility | 5 |  |
| 6 | Reliability under pressure | 5 |  |
| 7 | Management of Staff | 5 |  |
| 8 | Out put | 5 |  |
| 9 | Punctuality | 5 |  |
| 10 | Computer Literacy | 7 |  |
|  | **Total** | **55** |  |

**PART III: CONFIDENTIAL**

**A.** OVERALL ASSESSMENT BY HEAD OF DIVISION/UNIT/SECTION

|  |  |  |  |
| --- | --- | --- | --- |
| S/n | Assessment | Points | Scores |
| 1 | Qualification | 20 |  |
| 2 | Short Courses | 5 |  |
| 3 | Working Experience | 15 |  |
| 4 | Quality of Work (see part II above) | 55 |  |
| 5 | Other Public Activities | 5 |  |
|  | **Total Scores** | **100** |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature of Head of Division/Unit/Section Date

**B RECOMMENDATIONS AND DECISIONS**

1. Recommendation of Head of Department/Departmental Committee

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Signature of Head of Department Date

2. Recommendation of the Administrative and Services Appointments and Promotions Committee/Faculty and Centers appointments and Promotions Committee.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature of Chairman, ASAPC/FAPC/APC Date

**3. RECOMMENDATION OF THE SENIOR STAFF ESTABLISHMENTS COMMITTEE.**

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Signature of the Secretary to the Council.