

LAGOS STATE UNIVERSITY, OJO

CONFIRMATION OF APPOINTMENT FORM FOR SENIOR STAFF (ADMINISTRATIVE & TECHNICAL)

(A) S	STAFF DATA:				
	1.	NAME/PF. N	0:			
	2.	DEPARTMENT/UNIT: DATE AND GRADE OF FIRST APPOINTMENT: DATE AND GRADE OF PRESENT APPOINTMENT:				
	3.					
	4.					
	5.	DETAILS OF WORK DONE SINCE APPOINTMENT:				
		Signatu	re		Date	
(B)	GUIDELINES FOR CONFIRMATION OF APPOINTMENT: (a) The recommendation of the Head of Department shall be based on the following: (i) Satisfactory Performance on the Job (ii) Staff Performance Appraisal and Development Report (b) All Appointments subject to Confirmation shall lapse unless confirmed (c) The Appointments and Promotions Committee may grant an extension but where an extension is granted, it shall not exceed one year during which the appointment shall be confirmed or terminated.					
(c)	REC	RECOMMENDATION OF SUPERVISORY HEAD:				
		Name			Signature & Date	
(D)	I agr	COMMENT BY MEMBER OF STAFF I agreed/disagreed with the recommendation of my Head of Department/Division. I have the additional comments. (Extra sheets may be used if space provided is not enough).				
	SIGN	ATURE OF STA	FF		DATE	
(E)		RECOMMENDATION OF THE HEAD OF DEPARTMENT/DIVISION:				
		Name		 Si	ignature & Date	
		(FO	R OFFICIAL USE – ESTAB	LISHMENT DIVIS	SION)	
(F)	SPAD	EV SCORE:	(I) /	=		
• •						
			(III)/			
Avera	ge Sco	ore: =				