****CSIR FORM 2

**COUNCIL FOR SCIENTIFIC AND INDUSTRIAL RESEARCH**

**SENIOR STAFF/TECHNOLOGIST APPLICATION FOR PROMOTION FORM**

**PART I - PERSONAL RECORD (To be completed by Applicant)**

1. Name: …………………………………………………………………………..
2. Current Grade/Designation: ……………………………………………………
3. Institute and Station: ……………………………………………………………
4. Date of Birth: ………………………………………………………………..…
5. Date of First Appointment: ……………………………………………………..
6. Date of Last Promotion to present grade: ……………………………………...
7. Highest/Latest Qualifications and Dates they were obtained: ………………….
8. Training Courses Attended since last promotion: -……………………………
9. Grade Applying For: ……………………………………………………………

**Signature of Applicant: Date:**

**PART II - HEAD OF DIVISION/SECTION**

**(To be completed by Head of Division/Section of Applicant)**

1. Brief description of duties performed by Applicant: ………………………………….

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1. Was any disciplinary action taken against the Applicant since last promotion? **Yes / No**

If yes give details……………………………………………………………………..

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1. Summary of Annual Performance Appraisal Reports since last promotion.

**(*Please tick as appropriate*)**

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| --- | --- | --- | --- | --- | --- |
| **Year** | **A**  **Achieved All Targets Agreed Upon** | **B**  **Achieved Most Targets** | **C**  **Achieved Some Targets:**  **Performed Above Minimum Targets** | **D**  **Achieved Minimum Targets** | **E**  **No Targets Achieved** |
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13. Brief Comment on Applicant.

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14. Recommendation by Head of Division (***Please tick as appropriate***)

1. Recommended for promotion
2. Not recommended for promotion

**Name: Signature: Date:**

15. Applicant’s Comments:

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Name: Signature: Date:

**PART III – DIRECTOR’S ASSESSMENT**

16. Brief comments on the Record of Activities undertaken by Applicant

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17. i. Recommended for promotion

ii. Not recommended for promotion

***(Please tick as appropriate)***

18. Reasons for recommending / not recommending the Applicant

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Name: Signature: Date: