CSIR FORM 2C

**COUNCIL FOR SCIENTIFIC AND INDUSTRIAL RESEARCH**

**JUNIOR STAFF APPLICATION FOR PROMOTION FORM**

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

1. Name: ……………………………………………………………………………………………………………………………………
2. Grade/Designation: ……………………………………………………………………………………………………………
3. Institute and Station: ………………………………………………………………………………………………………
4. Date of Birth: ……………………………………….……………………………………………………………………………
5. Date of First Appointment: ……………………………………………………………………………………………
6. Date of Last Promotion to present grade: …………………………………………………………………
7. Annual Salary for the year under review: ………………………………………………………………………
8. Highest/Latest Qualifications and Dates they were obtained: …………………………………………………………………………………………………………………………………………………………………………… …………………………………………………………………………………………………………………………………
9. Training Courses Attended since last promotion…………………………………………………………

………………………………………………………………………………………………………………………………………………

1. Grade Applying For: ……………………………………………………….……………………………………………………

Signature: ……………………………………………Date: ………………………………………………

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

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

11. Brief description of duties performed………… ………………………………………………………………………

 ………………………………………………………………………………………………………………………………………………………….

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1. Was any disciplinary action taken against the officer since last promotion?

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

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 ………………………………………………………………………………………………………………………………………………….

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

**(Please Tick as appropriate)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **YEAR** |  **A****Performance Exceeded all** **Expectations and Targets** |  **B****Performance Met All** **Expectations and Targets** |  **C****Performance Met Some Expectations and Targets** |  **D****Performance Below Expectation and Targets** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

14. **Brief Comment on Candidate.**

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

1. Recommended for promotion [ ]
2. Not recommended for promotion [ ]

 Signature ……………………………………………………………………………Date………………………………………………

**PART III – DIRECTOR’S ASSESSMENT**

16. Brief Report on Candidate and Recommendation.

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Signature of Director…………………………………………………………… Date: ………………………………………