



CALEB UNIVERSITY, LAGOS (CUL)

ANNUAL APPRAISAL FORM FOR JUNIOR STAFF

PERIOD OF REPORT: FROM:----- TO:-----

NOTE: This report is designed to provide an up-to-date appraisal of the employee's competence, efficiency and official conduct which can serve as official record of service for purpose of transfer, promotion and training, as a means of assisting the employee in his/her development in CUL, and as a help to responsible supervisors towards precise and objective assessment of their staff.

PART I

SECTION A:

PERSONAL PARTICULARS AND RECORD OF SERVICE

(To be completed by individual member of staff)

Candidate is advised to complete this form carefully. Any improper completion, wrong or inaccurate information will disqualify a candidate from further establishment consideration.

1. Name -----
(Surname first, in capital letters)
2. Date of Birth: -----
Day Month Year Age
3. Marital Status: -----
4. College/Department/Division/Unit: -----
5. (a) Date of First Appointment in this University: -----
(b) Grade on First Appointment in this University: -----
6. (a) Date of Confirmation of Appointment: -----
(b) Reference number and date of letter of confirmation of Appointment: -----
7. (a) Present Grade: -----
(b) Date of last promotion or appointment: -----
(c) Present Salary per annum: -----
(State Level and Step)

8. Qualifications with dates: State subjects and grade of passes where appropriate.

Name of Institution	Duration		Qualification Obtained
	from	to	

9. Any change in status or emoluments during the period covered by this Report?

10. Record of service during the year. Details of movement to be stated with dates.

Department	From	To	Post/Grade	Officer under whom you served

11. In-service Courses Undertaken during the year.

Date	Course Title	Institution	Duration	Award

12. State type of in-service required.

Course Title	Institution	Duration

SECTION B

NATURE OF ASSIGNMENT DURING THE PERIOD

(To be completed by the individual member of staff)

13. State your main duties during the period covered by this report.

14.(a) What major difficulties did you encounter in the performance of your duties?

(b) Offer suggestions for their solutions:

15. Any other useful information peculiar to your during the period covered by this report?

Signature of Employee

Date

PART II
SECTION A:

(To be completed by immediate Supervisor or Head of Unit of Employee)

16. Number of days of sick leave during the period.
- (a) With medical certificate: -----
- (b) Without medical certificate: -----
17. Any sanctions incurred by the Employee during the period? If yes, please state the nature of such sanctions and disciplinary action taken.
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-
18. State main work performed by the employee during the period covered by this Report with particular attention to any work considered exceptional or especially meritorious.
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-
-
-
19. State any training recommended for the improvement of this employee.
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-
-
-
-
20. State any other useful information about the employee which is not covered by this Report.
-
-
-
-
-
21. Aspects of Performance:
- In assessing performance, you have already considered some or all of the aspects; would you now comment on and assess the aspects separately. Each aspect is described in terms of **Outstanding (A) and Unsatisfactory (E)**. The three intermediate ratings **(B), (C), and (D)** represent behavior between these extremes.
22. Rating "A" or "E" should be given only if you believe it is a generally true statement that could be supported, if necessary, by specific occurrences. If you feel any aspect of performance not in the list calls for special comments, please mention it at the end.

		A 5	B 4	C 3	D 2	E 1	
a)	CONDUCT: Behaves excellently well.						Always exhibits bad behavior.
b)	RELATIONSHIP WITH COLLEAGUES: Sensitive to other people's feelings; earns respect of others. Exceptionally effective in dealing with members of the public and colleagues.						Ignores and insensitive to other people's feelings; intolerant, does not earn respect of others. Tactless in dealing with the public and colleagues.
c)	LEVEL RESPONSIBILITY: Demonstrates excellent ability to handle duties effectively.						Discharges duties poorly.
d)	QUALITY OF WORK: Output of work always very neat and accurate						Work is always very rough and full of errors.
e)	QUANTITY OF WORK: Produces a lot within specified time.						Unable to meet targets.
f)	INITIATIVE: Demonstrates ability to solve basic problems with minimum supervision.						Always waiting to be told what he ought to do.
g)	ADAPTABILITY: Easily adjusts to the environment of work and consistent in output.						Unable to adjust to changes.
h)	EXPRESSION ON PAPER: Always cogent and clear.						Ambiguous, clumsy and obscure.
i)	ORAL EXPRESSION: Put his points across convincingly and concisely.						Finds it difficult to express himself.
j)	PUNCTUALITY AND REGULARITY: Regularly punctual at work.						No regard for punctuality.
k)	MANAGEMENT OF SUBORDINATE: (where applicable): Demonstrates ability to inspire subordinate to give their best.						Unable to use staff efficiently.
l)	ORGANIZATION OF WORK: Plans and arranges his work in an orderly manner.						Planless and lacks orderliness.
m)	SELF IMPROVEMENT EFFORT: Evidence of desire for improvement in qualification.						Lacks drive, rustic.
n)	ATTITUDE TO WORK: Always willing to take responsibilities without complaint.						Reluctant to take responsibility.
o)	DEGREE OF RELIABILITY: Highly dependable and trustworthy.						Undependable and cannot be trusted.
p)	KNOWLEDGE OF DEPARTMENTAL RULES: Highly knowledgeable and acquainted with procedures.						Poor knowledge of departmental operations.
q)	PERSONALITY: Very Highly comported.						Demonstrates poor mannerism unbecoming of a University staff.

Indicate overall performance of duties by ticking the appropriate box below. (This assessment should reflect the performance actually achieved in the circumstances which prevailed as presented in the assessment above):

A	=	5	=	Outstanding :	Exceptionally effective	-	4.50-5.00	<input type="checkbox"/>
B	=	4	=	Very Good :	Very effective	-	3.50-4.49	<input type="checkbox"/>
C	=	3	=	Good :	Effective	-	2.50-3.49	<input type="checkbox"/>
D	=	2	=	Fair :	Performs duties moderately well without serious shortcomings.	-	1.50-2.49	<input type="checkbox"/>
E	=	1	=	Unsatisfactory :	Definitely ineffective and not up to the duties.	-	1.00-1.49	<input type="checkbox"/>

 Signature of Assessing Supervisor/
 Head of Unit

 Name of Assessing Supervisor/
 Head of Unit

 Date

SECTION B

(To be completed by individual member of staff)

I certify that I have read the contents of this report and that my Head of Department has discussed them with me. I have the following comments to add:

Signature of Employee

Date

PART III:

OVERALL ASSESSMENT BY HEAD OF DEPARTMENT OR DEPARTMENTAL COMMITTEE

(To be completed by the Head of Department)

23. RECOMMENDATION FOR CONFIRMATION

I recommend that:

- (i) His/her appointment be confirmed to retiring age
- (ii) His/her appointment be further extended for six months
- (iii) His/her appointment be terminated with effect from -----

Signature of Head of Department/
Committee Chairman

Name of Head of Department/
Committee Chairman

Date

PART IV:

24A. RECOMMENDATION FOR NORMAL PROMOTION

Comments on your recommendation:

B. RECOMMENDATION FOR ACCELERATED PROMOTION

Comments on your recommendation:

He/she should be specially considered for accelerated promotion to -----

----- on -----

Grade Level

Give the reasons for your recommendation:

He/she has served under me for -----years.

Signature of Head of Department/
Committee Chairman

Name of Head of Department/
Committee Chairman

Date

PART V:

25. RECOMMENDATION FOR INCREMENT ONLY:

Comments on your recommendation:

(i) Grant Increment:

(ii) Do not Grant Increment:

(iii) Delay Increment:

Give reasons for your recommendation: -----

Signature of Head of Department/
Committee Chairman

Name of Head of Department/
Committee Chairman

Date

PART VI:

(To be completed by the Human Resources Officer)

26. Average Scores for three years (including the period of current assessment)

(i) -----

(ii) -----

(iii) -----

Head, Human Resources Division

Date