# **SPECIMEN APPLICATION FORM**

	PROMOTION TO THE POST O	F				
	Eligible year for promot	tion	•••••• <u>•</u>			
01.	Name of Applicant: Mr/Mrs/Miss:					
02.	(i) Present Place of work:					
	(ii) Section:					
	(iii)Telephone No: -  Office:  Mobile:					
	(iv) Email address:					
03.	Date of appointment:					
	<ul><li>(i) Date of appointment (Casual/I</li><li>(ii) Date of appointment (Permane</li></ul>	<u> </u>				
04.	Details of the Career up to date.					
	Designation	Grade	Effective Date			
05.	Salary particulars:					
	(i) Salary scale as at 31 <sup>st</sup> December 2024					
	(ii) Monthly salary (exclusive of the allowances):					
	(iii) Date of increment:					
06.	Have you been confirmed in the post:					
07.	Particulars of appointment held in the Public Service/State Corporations:					
	Post held Department/Corpora	tion Period From	of Service To			

	University/Institute	<u>Post</u>	Period of Service From To			
				_		
09.	Any other relevant informati	ion:				
10.	Have you obtained no-pay leave for employment or study abroad?					
11.	If you have obtained such leave indicate the date of commencement and the date of expiry:					
12.	What is the medium of langu	uage you expect to sit if a writt	ten examinati	on is held:		
I am al	so well aware that if any info	given above are true and accumation given above are found promotion is subjected to a car	d false or inac			
	Date :		ture of Applic	cant		
Regist	rar/Senior Assistant Registrar	Assistant Registrar,				
I recon	nmend/do not recommend* tl	nis applicant for promotion.				
		Head of Department/ Department/Section	,			
Date: .			Rubl	oer Stamp		

Particulars of service from the date of joining the University.

08.

#### (\*Delete whichever is inapplicable)

# SPECIAL REPORT THAT SHOULD BE SUBMITTED BY A CANDIDATE ALONG WITH AN APPLICATION FOR PROMOTION

#### Instructions to -

#### (a) Candidates:

Part one of this Special Report should be filled by the candidate. The candidate is also responsible to obtain leave particulars certified by the authorities concerned before handling over the application.

# (b) Heads of Divisions/Department:

The Head of the Division/Department is responsible to fill the Part Two of the Special Report on the basis of his/her knowledge and experience of the conduct and work performed by the applicant. The Head of the Division/Department is also requested to make his/her recommendation and forward this Special Report along with the application for promotion.

#### **PART ONE**

Post applied for	
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## (1) The Employee:

- (i) Name of employee:
- (ii) Date of Birth
- (iii) Age on 31<sup>st</sup> December 2024:
- (iv) Present Post:
- (v) Date of appointment to the present post:
- (vi) Date/Dates of previous appointment/s with Designations:
- (vii) Educational Qualifications:
   (Please attach Photocopies of the certificates of Educational & Professional which were obtained recently)

## (2) List of Duties:

(3) Particulars of leave taken during the last 03 years:

	Year 2022	Year 2023	Year 2024
a) Casual			
b) Vacation			
c) Medical			
d) Study			
e) No-pay			
f) Half-pay			

f) I	Half-pay				
Signature of Applicant		0	Signature and the name of officer certifying above information		
Date:					
PART T	wo				
<b>(4)</b>	Administrat	ion Report			
	erms of quantity and quality				
	(Describe	work improvement: the nature of work white period, in terms of qua		aproved by the employee	
	<ul><li>(b) Strengths of employee:</li><li>(What are the assets of the employee that are useful to the University)</li></ul>				
	(i)	Skills - Communicati Writing	ons		
	(ii)	Performance -			
	(iii)	Special Contributions	} <b>-</b>		

- (c) Weaknesses -
  - (i) Inadequate skills
  - (ii) Absence from workplace
  - (iii) External obstacles which have influenced the performance

		(iv)	Resistance to c	hange				
		(v)	Delays in atten	ding to wor	·k			
		(vi)	Any other					
	(d)					s improved	d himself/herself during	
	(e)	(Identify	e's failure: situations of failury, its property, w	_	•	her damag	ges caused to the	
	(f)		ents received duri	•	•	nediately l	before the date	
	(g)		dations received or promotion.	during the	ast three yo	ears prior (	to becoming	
(5)		re any action	ons which might ments.	be taken w	hich would	lead to hig	gher levels of	
(6)	Any othe	r commen	ts:					
(7)	Recomme	endation fo	or promotion:		Recommer	nded. /Do 1	not Recommended.	
		Signature	e of Recommendi	ng Officer				
		Name &	Designation of R	ecommend	ing Officer	:		•
		Rubber S	tamp of Recomm	nending Of	ficer:			•
		Date reco	ommended:					