



Culture

Stocked by Min. of Ed. And

TEACHING SERVICE

RECOMMENDATION FOR CONFIRMATION

(Parts I and II to be completed in triplicate. Original and duplicate to be forwarded to Chief Education Officer, triplicate to be retained by Manager. Part IV to be completed by Education Officer.)

PART I

MEDICAL CERTIFICATE

1. Name..... TS No.....
.....
2. Appointment..... Date of first
appointment.....
(Items 1 and 2 to be completed by Manager)
3. I have examined the above named and find him/her/ *fit/unfit for permanent
employment as a
.....
Remarks.....
.....
.....
Date.....
.....
Medical Practioner

(*Delete where not applicable)

PART II

RECOMMENDATION BY EDUCATION OFFICER/HEADTEACHER

1. The above named has served on probation from.....,
19.....
to date and, being eligible for confirmation in appointment on.....,
19.....
has expressed the wish to be so confirmed.
2. Present salary is K.....in scale.....
3. Proficiency and progress in appointment.....
.....
.....
4. Conduct and character (details of any adverse report or disciplinary action since date
of first appointment must be given)
.....
.....
.....
5. Year in which Efficiency Bar Examination passed, where
applicable.....
6. General remarks.....
.....
.....
.....

7. I recommend that Mr/Miss.....
Be confirmed in appointment with effect from the date on which service on probation
commenced
....., 19.....

Date.....

Education

Officer/Headteacher

PART III

THE PERMANENT SECRETARY

MINISTRY OF EDUCATION AND CULTURE

1. Particulars of this employee given in Part I and II of this recommendation are correct, according to my records
2. I recommend-

*that Mr/Miss.....
be confirmed in appointment with effect from
....., 19.....

*that Mr/Miss..... should not
be confirmed in appointment, for the following
reason/s.....

.....
.....
.....
.....
...

Date.....

Chief Education

Officer

*Delete where not applicable

ORIGINAL: To be forwarded.

DUPLICATE: to be retained for Provincial records

PART IV

A. PERSONAL PARTICULARS

1. Full name.....
2. Nat. Reg.
No.....

2. Tribe..... 4.
Village.....

3. Chief..... 6.
District.....

7. Approximate date of birth.....

B. EDUCATION AND/OR TRAINING

[illegible]

C .PREVIOUS EXPERIENCE:

[illegible]

D. POSTINGS:

Dates		School	District	Province
From	To			
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FOR HEADQUARTERS USE ONLY:

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