

**EVANGEL UNIVERSITY AKAEZE**

**ANNUAL APPRAISAL FORM (JUNIOR STAFF EUSS 5 AND BELOW)**

**INSTRUCTIONS:**

1. Part I is to be completed by the Staff to be assessed/appraised while Part II is to be completed by the Head of Department/Unit.
2. The completed form should be forwarded as an attachment to the HOD Office email address such as personnel.head@evangeluniversity.edu.ng for Personnel Unit.
3. Heads of Departments are to collate all the completed assessed forms in their respective departments and forward them as attachments to the Registrar office email address registry@evangeluniversity.edu.ng.

**PART I**

PERIOD OF REPORT: OCTOBER 1ST 2024 TO SEPTEMBER 30TH 2025

1. Name: (IN FULL) Click here to enter text.

 2(a) Post: Click here to enter text. 2(b) Staff ID. No: Click here to enter text.

1. College/Department: Click here to enter text.
2. Salary EUSSS Level: Click here to enter text. Step: Click here to enter text.
3. Phone Number: Click here to enter text.
4. E-mail Address: Click here to enter text.
5. Date of First Appointment in a Scheduled Service: Click here to enter a date.
6. Educational Qualifications, Stating dates and Institutions

|  |  |  |
| --- | --- | --- |
| **Degree** | **Date** | **Name of Institution** |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |

1. Rank on First Appointment in a Scheduled Service:Click here to enter text.
2. Date of Appointment in Evangel University:Click here to enter a date.
3. Rank on Appointment in Evangel University:Click here to enter text.
4. Date of Confirmation of Appointment in Evangel University:

Click here to enter a date.

1. Date of Last promotion/Upgrading/Re-designation in Evangel University: Click here to enter a date.
2. Rank:Click here to enter text.
3. Additional Qualification(s) acquired during the period of this report:

|  |  |  |
| --- | --- | --- |
| **Degree** | **Date** | **Name of Institution** |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |

1. Schedule of Duties: Click here to enter text.
2. Number of days absent (during period of this report) on:
3. Sick Leave: Click here to enter text.
4. Casual Leave: Click here to enter text.
5. Examination Leave:Click here to enter text.
6. Official Tour: Click here to enter text.
7. Total Number of:
8. Queries:Click here to enter text.
9. Reprimands:Click here to enter text.
10. Warning:Click here to enter text.

  Click here to enter a date.

Signature of Employee Date:

**PART II**

**To be completed by the immediate supervisor**

|  |  |  |  |
| --- | --- | --- | --- |
| S/N | Trait  | Value of the Trait  | Score  |
| 1 | Integrity: (Ability to keep confidence, Honesty and Loyalty to the University). | 25 | Click here to enter text. |
| 2 | Attitude to Work: (Commitment, Enthusiasm, Drive). | 10 | Click here to enter text. |
| 3 | Ability to perform on the job: (Productivity Level, Handling of Job, Speed and Accuracy, Performance under pressure). | 15 | Click here to enter text. |
| 4 | Punctuality. | 10 | Click here to enter text. |
| 5 | Co-operation with colleagues/others. | 10 | Click here to enter text. |
| 6 | Ability to take on Higher Responsibility : (Promotability) | 15 | Click here to enter text. |
| 7 | Respect for Constituted Authority: (Patriotism, Accepting Responsibility etc.) | 15 | Click here to enter text. |
|  |  | 100 | Click here to enter text. |

**SUMMARY OF ASSESSMENT BY SUPERVISOR/REPORTING OFFICER**

(Please give your Assessment of the Staff member using the following Parameters)

1. Comment by Immediate Supervisor: Click here to enter text.
2. Name of Immediate Supervisor: Click here to enter text.

  Click here to enter a date.

Signature Date

1. Comments by staff member reported on: Click here to enter text.

  Click here to enter a date.

Signature of the Officer Reported on Date

1. Comment by the Head of Department/Unit: Click here to enter text.

**Final Recommendation:**

1. Recommended for Confirmation of Appointment (if not Confirmed)

 Click here to enter text.

 For Promotion/Non-Increment: Click here to enter text.

1. Name of the Head of Department/Unit: Click here to enter text.

  Click here to enter a date.

 Signature Date:

**COMMENTS BY THE REGISTRAR**

Click here to enter text.

Promote/Not Promote: Click here to enter text.

Normal Increment: Click here to enter text.

  Click here to enter a date.

Signature of Registrar Date:Click here to enter a date.