



**LAGOS STATE UNIVERSITY OF EDUCATION  
OTO/IJANIKIN, LAGOS STATE, NIGERIA  
(with a campus @ Odo-Noforija, Epe)**

**CONFIRMATION OF APPOINTMENT  
ACADEMIC STAFF**

**(A) STAFF DATA**

1. NAME/PF .....
2. DEPARTMENT/UNIT .....
3. DATE AND GRADE OF FIRST APPOINTMENT .....
4. DATE AND GRADE OF PRESENT APPOINTMENT .....
5. DETAILS OF WORK DONE SINCE APPOINTMENT .....

.....  
**SIGNATURE**

.....  
**DATE**

**(B) GUIDELINES FOR CONFIRMATION OF APPOINTMENT**

- (a) The recommendation of the Head of Department shall be based on the following:
  - (i) Satisfactory Performance on the Job
  - (ii) Annual Performance Evaluation Report for the last two (2) years
- (b) All Appointments subject to Confirmation shall lapse unless confirmed.
- (c) The Appointments and Promotions Committee may grant an extension but where an extension is granted, it shall not exceed one year during which the Appointment shall be confirmed or terminated.

**(C) RECOMMENDATION OF SUPERVISORY HEAD:**

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.....  
**NAME**

.....  
**SIGNATURE**

**(D) COMMENT BY MEMBER OF STAFF**

I agreed/disagreed with the recommendation of my Head of Department/Division. I have these additional comments. (Extra sheets may be used if space provided is not enough)

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**SIGNATURE OF STAFF**

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**DATE**

**(E) RECOMMENDATION OF THE HEAD OF DEPARTMENT/DIVISION**

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**NAME**

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**SIGNATURE**

**N.B: Academic members of staff below Lecturer II, cannot apply for Confirmation of Appointment**

**(FOR OFFICIAL USE – ESTABLISHMENT DIVISION)**

- (F) APER SCORE:**
- (i) .....
  - (ii) .....
  - (iii) .....
- AVERAGE SCORE**



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**CONFIRMATION OF APPOINTMENT  
NON-ACADEMIC SENIOR STAFF**

**(A) STAFF DATA**

6. NAME/PF .....
7. DEPARTMENT/UNIT .....
8. DATE AND GRADE OF FIRST APPOINTMENT .....
9. DATE AND GRADE OF PRESENT APPOINTMENT .....
10. DETAILS OF WORK DONE SINCE APPOINTMENT .....

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**SIGNATURE**

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**DATE**

**(B) GUIDELINES FOR CONFIRMATION OF APPOINTMENT**

- (d) The recommendation of the Head of Department shall be based on the following:
  - (iii) Satisfactory Performance on the Job
  - (iv) Annual Performance Evaluation Report for the last two (2) years
- (e) All Appointments subject to Confirmation shall lapse unless confirmed.
- (f) The Appointments and Promotions Committee may grant an extension but where an extension is granted, it shall not exceed one year during which the Appointment shall be confirmed or terminated.

**(C) RECOMMENDATION OF SUPERVISORY HEAD:**

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**NAME**

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**SIGNATURE**

**(D) COMMENT BY MEMBER OF STAFF**

I agreed/disagreed with the recommendation of my Head of Department/Division. I have these additional comments. (Extra sheets may be used if space provided is not enough)

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**SIGNATURE OF STAFF**

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**DATE**

**(E) RECOMMENDATION OF THE HEAD OF DEPARTMENT/DIVISION**

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**NAME**

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**SIGNATURE**

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- (F) APER SCORE:**
- (i) .....
  - (ii) .....
  - (iii) .....
- AVERAGE SCORE**



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**CONFIRMATION OF APPOINTMENT  
NON-ACADEMIC JUNIOR STAFF**

**(A) STAFF DATA**

**11. NAME/PF**  
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**12. DEPARTMENT/UNIT** .....

**13. DATE AND GRADE OF FIRST APPOINTMENT** .....

**14. DATE AND GRADE OF PRESENT APPOINTMENT** .....

**15. DETAILS OF WORK DONE SINCE APPOINTMENT** .....

.....  
**SIGNATURE**

.....  
**DATE**

**(B) GUIDELINES FOR CONFIRMATION OF APPOINTMENT**

(g) The recommendation of the Head of Department shall be based on the following:

(v) Satisfactory Performance on the Job

(vi) Annual Performance Evaluation Report for the last two (2) years

(h) All Appointments subject to Confirmation shall lapse unless confirmed.

(i) The Appointments and Promotions Committee may grant an extension but where an extension is granted, it shall not exceed one year during which the Appointment shall be confirmed or terminated.

**(C) RECOMMENDATION OF SUPERVISORY HEAD:**

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**NAME**

.....  
**SIGNATURE**

**(D) COMMENT BY MEMBER OF STAFF**

I agreed/disagreed with the recommendation of my Head of Department/Division. I have these additional comments. (Extra sheets may be used if space provided is not enough)

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**SIGNATURE OF STAFF**

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**DATE**

**(E) RECOMMENDATION OF THE HEAD OF DEPARTMENT/DIVISION**

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.....

.....  
**NAME**

.....  
**SIGNATURE**

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**(FOR OFFICIAL USE – ESTABLISHMENT DIVISION)**

**(F) APER SCORE:**

**(i)** .....

**(ii)** .....

**(iii)** .....

**AVERAGE SCORE**