



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

**CONFIRMATION OF APPOINTMENT FOR ALL 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 DATE

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

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NAME 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**