



<b>APPOINTMENT INFORMATION:</b>	
Appointment Date: .....	
Position Title: .....	Grade/Position Level & Sub Level: .....
<b>MERITORIOUS PROMOTIONS GRANTED IN THE PAST:</b>	
Meritorious promotion effective date: .....	
Grade/Position Level & Sub Level: .....	
<b>LAST PROMOTION DETAILS:</b>	
Date of last promotion: .....	Grade/Position Level & Sub Level: .....
<b>PRESENT JOB INFORMATION:</b>	
Position Title: .....	Position Level & Sub Level: .....

<p><b>Extra Ordinary Leave (EOL) availed:</b></p> <p>Duration in months: .....</p> <p>From:.....</p> <p>To:.....</p>	<p><b>Long term training/Higher studies availed:</b></p> <p>Duration in months: .....</p> <p>From:.....</p> <p>To:.....</p>
<p><b>Number of active years of service completed from the date of initial appointment:</b></p> <p>.....</p>	<p><b>Number of active years of service completed since the last promotion:</b></p> <p>.....</p>

<b>PERFORMANCE</b> – Ratings for the past three years: (each out of the total factors) copies of performance evaluation reports should be attached.				
Year	Improvement Needed	Good	Very Good	Outstanding

<b>(i) PROMOTON RECOMMENDED TO:</b> Position Title: ..... Position Level & Sub Level: .....								
(ii) Is the proposed promotion against the approved post? _____ (iii) State whether the candidate fully matches the job requirements of the post: _____ (iv) Qualification requirements for the proposed post _____								
Information verified by HR Officer/Chief HR Officer of Ministry/Agency/Dzongkhag  <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Date</td> <td style="width: 33%; border: none;">Signature</td> <td style="width: 33%; border: none;">Name &amp;</td> </tr> <tr> <td style="border: none;">Designation</td> <td style="border: none;"></td> <td style="border: none; text-align: right;">(Official Seal)</td> </tr> </table>			Date	Signature	Name &	Designation		(Official Seal)
Date	Signature	Name &						
Designation		(Official Seal)						
Recommendation of the Ministry/Agency/Dzongkhag  I also certify that the information furnished in this form has been verified and is found correct and that there is no adverse report against him.								
Recommendation/Decision of the Ministry/Agency/Dzongkhag  <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Date</td> <td style="width: 33%; border: none;">Signature</td> <td style="width: 33%; border: none;">Head of Ministry/Agency/Dzongkhag</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none; text-align: right;">(Official Seal)</td> </tr> </table>			Date	Signature	Head of Ministry/Agency/Dzongkhag			(Official Seal)
Date	Signature	Head of Ministry/Agency/Dzongkhag						
		(Official Seal)						
Information verified by RCSC:  <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Name of the HRO, HRMD</td> <td style="width: 50%; border: none;">Name of the Chief HRO, HRMD</td> </tr> <tr> <td style="border: none; text-align: center;">(Official Seal)</td> <td style="border: none; text-align: center;">(Official Seal)</td> </tr> </table>			Name of the HRO, HRMD	Name of the Chief HRO, HRMD	(Official Seal)	(Official Seal)		
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(Official Seal)	(Official Seal)							
Decision of the RCSC, where applicable: Commission Meeting No. ....held on .....  Approved w. e. f. Date _____ Month _____ Year _____  Not approved:								