

Specimen Form of Application

Recruitment to the Post of Senior Tutor in Pharmacy in Schools of Pharmacy of the Ministry of Health.

Part 01 - To be filled by the relevant officer himself/ herself

01. a) Name of the officer with initials: -

b) Full Name : -

c) National Identity Card No: - Tele. No

02. Service Station: -

03. Date of recruitment to the training :-

04. Post held in Segment II "B" and date of appointment to the post:-.....

05. Date of promotion to Segment II "A" :-

06. a) Date of promotion to Grade I : -

b) Date of Promotion to Supra Grade : -

c) Present Grade and date of promotion to the present Grade :-

07. Experience From To..... in teaching

08. a) Has the officer earned all increments during the period of five (05) years immediately prior to the closing date of applications.

2017

2018

2019

2020

2021

b) If not earned, reasons :-

.....

09. Particulars of the no-pay leave obtained by the officer during the period of five (05) years immediately prior to the closing date of applications.

a) If the officer has obtained maternity leave on no pay, mention the relevant period :-
.....
.....

b) If the officer has obtained other leave on no – pay, mention the relevant period & reasons:-
.....
.....

10. a) Has the officer been subjected to any disciplinary inquiry or disciplinary punishment during the period of 05 years immediately prior to the closing date of application? :-
.....

b) If any, mention particulars,: -

I hereby certify that above particulars are true and correct and also I am aware if any information furnished herein is found to be incorrect or false before selection I am liable to be disqualified and if found so after appointment I am subject to be dismissed from service without any compensation.

.....
Date

.....
Signature of the Applicant

Part - 02 Recommendation of the immediate Supervising Officer.

I recommend this officer who is serving in the post of Pharmacist under my supervision to appoint to the post of Senior Tutor in Pharmacy in the School of Pharmacy if he/she has fulfilled the required qualifications.

.....
Date

.....
Official Stamp and Signature of the Officer
in Special Grade / Head of the Institution.

Part 03 - To be filled by the Officer- in charge of the subject referring to the personal file of the officer concerned.

I certify that all particulars furnished in the application from No.01 to No. 10 are correct according to the personal file of the officer.

.....
Date

.....
Signature of the Officer in -charge of the subject

Part 04 – Recommendation of the Administrative Officer: -

I hereby certify that all particulars furnished in the application of the officer concerned from No. 01 – 10 are correct. The application is recommended.

.....
Date

.....
Signature and official stamp of the
Administrative Officer

Part 05 - Recommendation of the Head of the Institution:-

I hereby certify that all the above particulars of Mr./Mrs./Miss.
..... who is in the post of Pharmacist are correct and that he/she has been promoted to Grade I or Supra Grade of the post of Pharmacist on I recommend this application for the post of Senior Tutor in Pharmacy of the School of Pharmacy which belongs to the Service of Professions Supplementary to Medicine.

.....
Date

.....
Signature and official stamp of the Head of
Institution.