

MODIBBO ADAMA UNIVERSITY, YOLA
(Office of the Registrar)
ESTABLISHMENT DIVISION

MAU/R/SSE/FORM15A

File No: _____

ANNUAL PERFORMANCE EVALUATION REPORT FORM
(ACADEMIC STAFF ONLY (CONUASS 01 - 07))

Period of Report 20__/20__ Session

PART 'A'
(To be completed by member of staff)

Completion of appraisal form is mandatory for all academic staff. Failure to do so will attract sanction.

1. PERSONAL DATA:

- i.) Names (Surname last) _____
- ii.) Present Status, grade Level and Salary: _____

- iii.) Faculty: _____
- iv.) Department: _____
- v.) Date, Status and Level at First Appointment in this University:

- vi.) Phone No. _____
- vii.) Email address _____
- viii.) Last Change in Status in this University, with date: _____

- ix.) Reference and Date of Notification concerning any more recent
consideration of change in status: _____
- x.) Date of Confirmation of Appointment: _____

2. QUALIFICATIONS

- A1. Doctorates, if any (with date): _____
- A2. Masters degree, if any (with dates): _____
- A3. Other relevant academic or professional qualifications: _____

3.0 PUBLICATIONS AND OTHER PRODUCTIVE WORKS

Attach list of publications, indicating authors, dates, titles, journals, volumes, publishers (where relevant) and pages. Items published or accepted for publications, or productive works completed, since first appointment or last change in status.

3.1 PUBLICATIONS (arrange in descending order according to the year of publication as in form MAUTECH/R/SSE/FORM 16G)

3.2 TEACHING/SUPERVISION AND PROFESSIONAL EXPERIENCE

3.3 Full-time teaching in a University or at an equivalent level (give dates, employers, post held):

EMPLOYER	POSITION HELD	DATE

3.4 Supervision of Undergraduate

S/N	COURSE CODE	ID NUMBER AND THESIS TITLE
	TOTAL	

Postgraduate work, since appointment/last change in status in this university:

S/N	COURSE CODE	ID NUMBER AND THESIS TITLE
	TOTAL	

3.5 Professional Practice/activities during the period of report. Attach list:

S/N	TYPE OF PRACTICE	ORGANISATION SERVED	DATE

4.0 STUDENTS/MANPOWER DEVELOPMENT

4.1 Teaching Responsibility (in the year of appraisal)

4.2 UNDERGRADUATE COURSES (arrange according to semester)

S/N	COURSE CODE	COURSE TITLE	CREDIT UNIT
	TOTAL		

POSTGRADUATE COURSES:

(in the following order: PGD, Masters & PhD.)

S/N	COURSE CODE	COURSE TITLE	CREDIT UNIT
	TOTAL		

5.0 UNIVERSITY ADMINISTRATION

List three administrative position/membership of committees during the period of report (see section 3 of the criteria):

S/NO	TYPE OF RESPONSIBILITY	PERIOD
	TOTAL	

6.0 COMMUNITY SERVICE

Give details (i.e research extension work, service on public bodies, membership of professional bodies, editorship of learned journals, public lectures, radio and television talks, service to learned and professional bodies, publications outside main field, etc. (see section 4 of the criteria)

S/NO	TYPE OF COMMUNITY SERVICE	PERIOD
	TOTAL	

7.0 TO BE COMPLETED BY STAFF MEMBER:**HUMAN RELATIONSHIP**

How would you describe your relationship with:

- a.) Your Subordinate? Good [] Satisfactory [] Unsatisfactory []
- b.) Your Colleagues? Good [] Satisfactory [] Unsatisfactory []
- c.) Your Superior? Good [] Satisfactory [] Unsatisfactory []

8.0 CERTIFICATION

I, certify that the information provided in this document to the best of my knowledge is correct.

(Signature of Staff member)

Date

PART C

FACULTY APPRAISAL COMMITTEE

4. Overall assessment and recommendation by the School Appraisal Committee forwarding its recommendation to the appropriate University Appraisal Panel.

Name

Signature

Date

PART D

5. University Appraisal Panel

Comment _____

Chairman's Name and Signature _____

CURRICULUM VITAE OF _____

1. PERSONAL DATA

- i. NAME: (Surname first, capitalized)
- ii. GENDER:
- iii. PLACE OF BIRTH:
- iv. NATIONALITY:
- v. STATE OF ORIGIN:
- vi. LOCAL GOVERNMENT AREA:
- vii. MARITAL STATUS:
- viii. NUMBER OF CHILDREN (if any)
- ix. LANGUAGES SPOKEN:
- x. PERMANENT HOME ADDRESS:
- xi. CORRESPONDENCE ADDRESS:
- xii. Telephone (Mobile):
- xiii. Email: i) skadalla@mautech.edu.ng.
ii) @Others
- xiv. DATE OF FIRST APPOINTMENT:
- xv. DATE/RANK OF FIRST APPOINTMENT AT MAUTECH, YOLA:
- xvi. DATE OF CONFIRMATION OF APPOINTMENT:
- xvii. PRESENT RANK:
- xviii. PRESENT SALARY GRADE LEVEL/STEP:
- xix. DATE OF LAST PROMOTION:
- xx. POSITION APPLIED FOR: (BOLD)

2. EDUCATIONAL INSTITUTIONS ATTENDED/QUALIFICATIONS (in descending order)

S/N	INSTITUTIONS ATTENDED	DATES	QUALIFICATIONS (with class of degree)

3. CAREER PROGRESSION/WORK EXPERIENCE (In descending order)

3.1 CAREER PROGRESSION

S/N	NAME OF ORGANIZATION	RANK	DATES

3.2 WORK EXPERIENCE

S/N	NAME OF ORGANIZATION	POSITION HELD	DATES

4. STUDENTS/MANPOWER DEVELOPMENT

4.1 Teaching Responsibility (in the year of appraisal)

4.1.1 UNDERGRADUATE COURSES (arrange according to semester)

S/N	COURSE CODE	COURSE TITLE	CREDIT UNIT
	TOTAL		

4.1.2 POSTGRADUATE COURSES:

(in the following order: PGD, Masters & PhD)

S/N	COURSE CODE	COURSE TITLE	CREDIT UNIT
	TOTAL		

4.2 PROJECT/THESES SUPERVISION

4.2.1 UNDERGRADUATE PROJECTS

S/NO	SESSION(S)	NUMBER OF STUDENTS
1		
2		
3		
	TOTAL	

4.2.2 POSTGRADUATE PROJECTS/THESES(PGD, Masters & PhD)

PGD

S/NO	SESSION(S)	NUMBER OF STUDENTS
1		
2		
3		
	TOTAL	

MASTERS

S/NO	NAME OF STUDENT	REG.NO.	THESIS TITLE	SESSION	REMARK

PhD

S/NO	NAME OF STUDENT	REG.NO.	THESIS TITLE	SESSION	REMARK

5. ADMINISTRATIVE RESPONSIBILITIES

S/NO	TYPE OF RESPONSIBILITY	PERIOD

6. COMMUNITY SERVICE

S/NO	TYPE OF COMMUNITY SERVICE	PERIOD

7. **MEMBERSHIP OF PROFESSIONAL ASSOCIATIONS/BODIES/INSTITUTES** (please list)

S/NO	NAME OF PROFESSIONAL ASSOCIATION	TYPE OF MEMBERSHIP	PERIOD

8. **PROJECT/THESES OF THE APPLICANT**

(In the following order: First Degree/PGD/Masters/PhD)

S/NO	TITLE OF PROJECT/THESES	INSTITUTION	YEAR
1			

9. **PUBLICATIONS** (arrange in descending order according to the year of publication and indicate your name in bold)

faceMAU/R/SSE/FORM (16G)

10. **EXTRA-CURRICULAR ACTIVITIES**

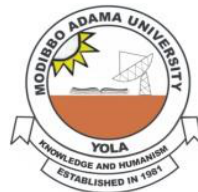
SIGNATURE

DATE

MAU/R/SSE/FORM 15D

UNIVERSITY APPRAISAL COMMITTEE SCORING SHEET

S/N	SP.No	Name of Staff	Department	Rank	Qualification	Research/Publications	Relevant Experience	Postgraduate Supervision	Under Graduate Supervision	Teaching Load	University Administration	Community Service	Total Score	REMARKS



MAU/R/SSE/FORM/15E

MODIBBO ADAMA UNIVERSITY, YOLA
 (Office of the Registrar)
ESTABLISHMENT DIVISION

DEPARTMENT OF: _____
ANNUAL APPRAISALS, REVIEWS AND PROMOTIONS EXERCISE

S/N	NAME & FILE NO (Surname first)	DATE ASSUMED DUTY, RANK & SALARY SCALE	DATE LAST PROMOTION/ REGRADING, POST, & SALARY SCALE	PRESENT POST & SALARY SCALE	DATE OF CONFIRMATION OF APPOINTMENT	QUALIFICATION(S) DEGREE(S)/ CERTIFICATE(S), WITH DATE(S)	WORKING EXPERIENCE		TIME IN RANK	NUMBER OF ACCEPTED PUBLICATIONS	DEPARTMENTAL APPRAISAL COMMITTEE RECOMMENDATION	FACULTY APPRAISAL RECOMMENDATION	UNIVERSITY APPRAISAL PANEL	REMARKS
							University	Others						

MODIBBO ADAMA UNIVERSITY YOLA

OFFICE OF THE REGISTRAR

ESTABLISHMENT DIVISION

MAU/R/SSE/FORM16G

PUBLICATIONS AND PRODUCTIVE WORKS LISTING FORMAT

(FOR 20..../20... APPRAISAL AND PROMOTION EXERCISE)

S.P. No.....

S/No.	Types and Details of Publications or Productive Works in Candidates' Discipline (as Published/documented)	Candidate's score	Departmental Board Score	Faculty Appraisal Panel's Score	University Appraisal Panel's Score
A.					
1	Mubi, A. M. Tukur, A. L. (2012) Species Density and Diversity Along Geomorphic Gradient in Gashaka-Gumti National Park, Nigeria. <i>Ethiopian Journal of Environmental Studies and Management</i> Vol 5 No.4 pp. 511-518. http://dx.doi.org/10.4314/ejesm (Ethiopia)				
2.					
3.					
B.					
1.	Abdulkadir, A. A. Ogunlola, S. K. (2011). <i>Radiation and Mankind</i> . Star: Ibadan. 250 pp. ISBN 978-978-921-011-4 (Nigeria)				
2.					
3.					
C					
1.	Tukur, A. L. (2005.) The Mambilla Plateau. In Tukur, A. L., Adebayo, A. A. & Galtima M. (Eds.) <i>The Land and People of the Mambilla Plateau</i> HEN Books: Ibadan. pp. 1-4. (Nigeria)				
2.					
3.					
D.					
1.					
2.					
3.					
E.					
1.					
2.					