



Maharashtra Institute of Dental Sciences and Research (Dental College)  
Vishwanathpuram Ambajogai Road, Latur 413512  
**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**



(Period of Appraisal: From January 2024 to Sept 2024)

**EMPLOYEE DETAILS:**

Name of the Faculty	:	Dr. Raghavendra. Mehta
Department	:	Periodontology
Designation	:	Professor & Head
Date of Joining the Institute	:	15/10/2018
Employment ID	:	PERIOTemp-051
Gross Salary	:	
Mobile No.	:	9765798877,
E-mail ID	:	drmehtaraghu@gmail.com

**GUIDELINES:**

- The period of evaluation shall be January 2024 to Sept - 2024
- All the information should be provided accurately and clearly. Additional information worth mentioning may be provided in separate sheets.
- Appraisal Committee for Faculty: Evaluating Authority (EA) is HOD and the Reviewing Authority (RA) is The Head of Institution (Principal/ Director/Dean).
- Appraisal Committee for HOD: Evaluating Authority (EA) is The Head of Institution (Principal/ Director/ Dean) and the Reviewing Authority (RA) is The Executive Director (or the competent authority appointed on his behalf) and an External Assessor if required.
- The EA shall verify all the information, by supporting proofs before commenting on the performance



Maharashtra Institute of Dental Sciences and Research (Dental College)  
Vishwanathpuram Ambajogai Road, Latur 413512



**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**

**RECORDS OF ABSENCE (TO BE FILLED BY THE HR)**

Sr. No.	Type of Leave	No. of Leaves Availed		Signature of HR with Date
		Term I Jan- Jun	Term II Jul- Dec	
1	Casual Leave (CL)			
2	Medical Leave (ML)			
3	Office Duty (OD)			
4	Maternity Leave (MTL) (if applicable)			
5	Leave without Pay (LWP)			
6	Earned Leaves (EL) (if Applicable)			
7	Special Leave (SL)			

- Provide Details of the nature / purpose of Special Leaves (if applicable)



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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**

**CATEGORY-I:TEACHING,LEARNING&EVALUATIONRELATEDACTIVITIES**

Sr. No	Nature of Activity	API Score allotted	Self-appraisal Score	API Score Verified by HOD	Remarks by Director / Dean / Principal
a.	<b>No. of UG Lectures / PG contact hours undertaken</b> during the year (100% compliance = 15) No. of Lectures allotted : UG: <u>24</u> PG: <u>160</u> No. of Lectures conducted : UG: <u>24</u> PG: <u>160</u>	15	15	15	
b.	<b>No. of UG Practical / Clinics and PG Clinical sessions</b> (100% compliance = 15) No. of activities allotted : UG: <u>280</u> PG: <u>120</u> No. of activities conducted : UG: <u>280</u> PG: <u>120</u>	15	15	15	
c.	<b>No. of Tutorials / Seminars / Journal Clubs / Other teaching activities</b> (100% compliance = 10) No. of activities allotted : UG: <u>120</u> PG: <u>120</u> No. of activities conducted : UG: <u>120</u> PG: <u>120</u>	10	10	10	
d.	<b>Patient treatments and Routine clinical procedures performed</b> (as per instruction of HOD and Principal) 5 mark for minimum work/ 10 for moderate work/ 15 for maximum work/ 20 marks for exceptional performance)	20	20	20	
e.	<b>Special/remarkable/difficult clinical work or patients treatments provided</b> (2 mark per case/patients)	10	10	10	
f.	<b>Examination duties</b> (10 mark University/5 mark Institute level) (Question Paper setting / Answer Paper Correction / Practical or clinical Exam Conduction / Viva voce)	20	20	20	
g.	<b>Interdisciplinary / Interdepartmental Add-on or Value-added Course conducted</b> (5 Marks per activity)	10	10	10	
<b>Total score</b>		100	100	100	

Signature of Faculty

Verified by HOD



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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**

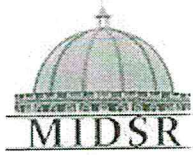
**CATEGORY – II: PROFESSIONAL DEVELOPMENT, CO-CURRICULAR & EXTENSION ACTIVITIES**

Sr. No.	Nature of Activity	API Score allotted	Self-appraisal Score	API Score Verified by HOD	Remarks by Director / Dean / Principal
a.	<b>Faculty development Training obtained</b> (Training in Medical Education Technology / subject specific hands on training courses) (10 Marks per activity)	20	20	20	
b.	<b>Professional development activities</b> such as participation in seminar / conferences / Workshops (5 Marks for each activity)	10	05	05	
c.	<b>Invited talks/lectures in refresher / faculty development courses / workshops / seminars / conferences</b> (5 Marks for each activity)	10	—	—	
d.	<b>Participation in Student related co-curricular, extension and field based activities.</b> (i) Discipline related co-curricular activities (e.g. remedial classes, career counseling, study visit, student seminar, Mentoring and other events) (ii) Other co-curricular activities (Cultural,sports, NSS, NCC, etc.) (iii) Extension and dissemination activities (public lectures /talks / field visits,etc). (5 Marks for each activity)	15	10	10	
e.	<b>Contribution in management and governing bodies of the department and institution through participation in institutional committees and administrative responsibilities.</b> (i) Administrative responsibility (including as dean /Principal/chairperson/convenor/ teacher in-charge/similar other duties that require regular office hours for its discharge) (5 Marks) (ii) Substantial contribution in BOS, Academic, Administrative or other Committees.(5 Marks)	15	15	15	
<b>Total of (II)</b>		70	50	50	

  
Signature of Faculty

  
Verified by HOD





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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**

**CATEGORY – III: RESEARCH & ACADEMIC CONTRIBUTIONS**

Sr. No.	Nature of Activity	API Score allotted	Self- appraisal Score	API Score Verified by HOD	Remarks by Director / Dean / Principal
1.	<b>Research Publications (Journals) as First/ second / corresponding author only</b> i. International journals (indexed in Pub Med / Scopus / Web of Science/ UGC Care) (5 Marks each) ii. National journals (indexed in Pub Med / Scopus / Web of Science / UGC Care list) (2.5 Marks each) iii. Other National / International Peer Reviewed Journal (1mark each)	15	05	15	
2.	<b>Research Publications other than journals articles (Books, Chapters in books)</b> International Publisher: 5 per book / chapter National Publisher: 2.5 per book / chapter	10	10	10	
3.	<b>Sponsored Projects</b> Minor Research Projects: 5 Each Major Projects: 10 Each	10	0	0	
4.	<b>Research Guidance</b> Ph.D. – 5 per student per year MD/MS – 2.5 per student per year	10	5	5	
5.	<b>Fellowship/ Awards</b> (International level: 5 each National level: 2.5 each)	10	0	0	
6.	<b>Papers presented in Conferences &amp; Seminars</b> International Level: 05 each paper National Level: 03 each paper State/ University Level: 02 each paper	10	0	0	
7.	<b>Development of e-learning content / material</b>	5	05	05	
8.	<b>Research Evaluation and Reviewers / Editors</b> Ph.D. (5), MD/MS (3), Journal/Conf. (2) Editors/Reviewer (2)	10	08	08	
9	<b>Copyright (5) or Patents (10) registered</b>	10	10	10	
	<b>TOTAL (III)</b>	90	43	43	

Signature of Faculty

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**CATEGORY-IV: OTHER RELATED ACTIVITIES**

Sr. No	Nature of Activity	API Score allotted	Self- appraisal Score	API Score Verified by HoD	Remarks by Director / Dean / Principal
a.	<b>Organizing of conferences / workshop</b> i. National – 10 per activity ii. State / regional – 5 per activity	10	10	10	
b.	<b>Participation in various Bodies of University or Government committees</b> i. National – 10 per activity ii. State / regional – 5 per activity	10	05	05	
c.	<b>Additional Qualification</b> (Degree / Diploma / Fellowship) received (10-International 5-National)	10	-	-	
d.	<b>Additional Duties</b> (as allotted by Trust / Management / Principal towards welfare of Institute / trust / campus)	10	10	10	
	<b>TOTAL (IV)</b>	40	25	25	

  
Signature of Faculty

  
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**EVALUATION SUMMARY:**

APIs	API Score allotted	Self-appraisal Score	API Score Verified by HoD	Remarks by Director / Dean / Principal
<b>Category – I :</b> Teaching, Learning & Evaluation Related Activities	100	100	100	
<b>Category – II :</b> Professional Development, Co-Curricular & Extension Activities	70	50	50	
<b>Category – III :</b> Research and Academic Contributions	90	43	43	
<b>Category – IV :</b> Other Related Activities	40	25	25	
<b>TOTAL</b>	300	218	218	
<b>Minimum Score required</b> <ul style="list-style-type: none"><li>○ 40% - Tutors/BDS Staff</li><li>○ 50% - Lectures</li><li>○ 55% - Reader</li><li>○ 60% - Professor and HOD</li></ul>	120 150 165 180			

Signature of Faculty

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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**

**ADDITIONAL COMMENTS (if any) BY THE FACULTY**

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Date:

Signature of Faculty

**ASSESSMENT BY THE HOD (EA)**

(The assessment should be based predominantly on the criterion mentioned. The opinion of colleagues, subordinates, superiors will be given due weightage. The overall utility/ contribution of the candidate to the department and institute are assessed. In case of interdepartmental assignments, EA should seek remarks from the concerned HOD.)

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Date:

Name & Signature of HOD

**REVIEW OF ASSESSMENT & RECOMMENDATION BY THE DEAN / PRINCIPAL(RA)**

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Date:

Name & Signature  
External Assessor (IfAny)

Name & Signature  
Head of Institution





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(Period of Appraisal: From January 2024 to Sept 2024)

**EMPLOYEE DETAILS:**

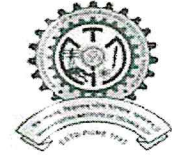
Name of the Faculty	:	Dr. Truphi Gajendra Ciri
Department	:	Periodontology
Designation	:	Lecturer
Date of Joining the Institute	:	01/12/2022
Employment ID	:	
Gross Salary	:	
Mobile No.	:	8459940281
E-mail ID	:	truphi179iri@gmail.com

**GUIDELINES:**

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**RECORDS OF ABSENCE (TO BE FILLED BY THE HR)**

Sr. No.	Type of Leave	No. of Leaves Availed		Signature of HR with Date
		Term I Jan-Jun	Term II Jul-Dec	
1	Casual Leave (CL)	6	5	
2	Medical Leave (ML)	3	1	
3	Office Duty (OD)			
4	Maternity Leave (MTL) (if applicable)			
5	Leave without Pay (LWP)	3		
6	Earned Leaves (EL) (if Applicable)			
7	Special Leave (SL)			

- Provide Details of the nature / purpose of Special Leaves (if applicable)



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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**

**CATEGORY-I:TEACHING,LEARNING&EVALUATIONRELATEDACTIVITIES**

Sr. No	Nature of Activity	API Score allotted	Self-appraisal Score	API Score Verified by HOD	Remarks by Director / Dean / Principal
a.	No. of UG Lectures / PG contact hours undertaken during the year (100% compliance = 15) No. of Lectures allotted : UG: <u>24</u> PG: _____ No. of Lectures conducted : UG: <u>24</u> PG: _____	15	15	15	
b.	No. of UG Practical / Clinics and PG Clinical sessions(100% compliance = 15) No. of activities allotted : UG: <u>120</u> PG: _____ No. of activities conducted : UG: <u>120</u> PG: _____	15	15	15	
c.	No. of Tutorials / Seminars / Journal Clubs / Other teaching activities(100% compliance = 10) No. of activities allotted : UG: <u>80</u> PG: _____ No. of activities conducted : UG: <u>80</u> PG: _____	10	10	10	
d.	<b>Patient treatments and Routine clinical procedures performed</b> (as per instruction of HOD and Principal) 5 mark for minimum work/ 10 for moderate work/ 15 for maximum work/ 20 marks for exceptional performance)	20	20	20	
e.	<b>Special/remarkable/difficult clinical work or patients treatments provided</b> (2 mark per case/patients)	10	10	10	
f.	<b>Examination duties</b> (10 mark University/5 mark Institute level) (Question Paper setting / Answer Paper Correction / Practical or clinical Exam Conduction / Viva voce)	20	20	20	
g.	<b>Interdisciplinary / Interdepartmental Add-on or Value-added Course conducted</b> (5 Marks per activity)	10	10	10	
<b>Total score</b>		100	100	100	

Signature of Faculty

Verified by HOD





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## ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF



### CATEGORY – II: PROFESSIONAL DEVELOPMENT, CO-CURRICULAR & EXTENSION ACTIVITIES

Sr. No.	Nature of Activity	API Score allotted	Self-appraisal Score	API Score Verified by HOD	Remarks by Director / Dean / Principal
a.	<b>Faculty development Training obtained</b> (Training in Medical Education Technology / subject specific hands on training courses) (10 Marks per activity)	20	20	20	
b.	<b>Professional development activities</b> such as participation in seminar / conferences / Workshops (5 Marks for each activity)	10	10	10	
c.	<b>Invited talks/lectures in refresher / faculty development courses / workshops / seminars / conferences</b> (5 Marks for each activity)	10	5	0	
d.	<b>Participation in Student related co-curricular, extension and field based activities.</b> (i) Discipline related co-curricular activities (e.g. remedial classes, career counseling, study visit, student seminar, Mentoring and other events) (ii) Other co-curricular activities (Cultural,sports, NSS, NCC, etc.) (iii) Extension and dissemination activities (public lectures /talks / field visits,etc). (5 Marks for each activity)	15	10	10	
e.	<b>Contribution in management and governing bodies of the department and institution through participation in institutional committees and administrative responsibilities.</b> (i) Administrative responsibility (including as dean /Principal/chairperson/convener/ teacher in-charge/similar other duties that require regular office hours for its discharge) (5 Marks) (ii) Substantial contribution in BOS, Academic, Administrative or other Committees.(5 Marks)	15	15	15	
<b>Total of (II)</b>		70	55	55	

Signature of Faculty

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**CATEGORY – III: RESEARCH & ACADEMIC CONTRIBUTIONS**

Sr. No.	Nature of Activity	API Score allotted	Self-appraisal Score	API Score Verified by HOD	Remarks by Director / Dean / Principal
1.	<b>Research Publications (Journals) as First/ second / corresponding author only</b> i. International journals (indexed in Pub Med / Scopus / Web of Science/ UGC Care) (5 Marks each) ii. National journals (indexed in Pub Med / Scopus / Web of Science / UGC Care list) (2.5 Marks each) iii. Other National / International Peer Reviewed Journal (1mark each)	15	—	—	
2.	<b>Research Publications other than journals articles</b> (Books, Chapters in books) International Publisher: 5 per book / chapter National Publisher: 2.5 per book / chapter	10	—	—	
3.	<b>Sponsored Projects</b> Minor Research Projects: 5 Each Major Projects: 10 Each	10	—	—	
4.	<b>Research Guidance</b> Ph.D. – 5 per student per year MD/MS – 2.5 per student per year	10	—	—	
5.	<b>Fellowship/ Awards</b> (International level: 5 each National level: 2.5 each)	10	—	—	
6.	<b>Papers presented in Conferences &amp; Seminars</b> International Level: 05 each paper National Level: 03 each paper State/ University Level: 02 each paper	10	3	3	
7.	<b>Development of e-learning content / material</b>	5	—	—	
8.	<b>Research Evaluation and Reviewers / Editors</b> Ph.D. (5), MD/MS (3), Journal/Conf. (2) Editors/Reviewer (2)	10	—	—	
9	<b>Copyright (5) or Patents (10) registered</b>	10	10	10	
	<b>TOTAL (III)</b>	90	13	13	

Signature of Faculty

Verified by HOD



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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**

**CATEGORY-IV: OTHER RELATED ACTIVITIES**

Sr. No	Nature of Activity	API Score allotted	Self- appraisal Score	API Score Verified by HoD	Remarks by Director / Dean / Principal
a.	<b>Organizing of conferences / workshop</b> i. National – 10 per activity ii. State / regional – 5 per activity	10	—	—	
b.	<b>Participation in various Bodies of University or Government committees</b> i. National – 10 per activity ii. State / regional – 5 per activity	10	—	—	
c.	<b>Additional Qualification</b> (Degree / Diploma / Fellowship) received (10-International 5-National)	10	—	—	
d.	<b>Additional Duties</b> (as allotted by Trust / Management / Principal towards welfare of Institute / trust / campus)	10	5	5	
	<b>TOTAL (IV)</b>	40	5	5	

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**EVALUATION SUMMARY:**

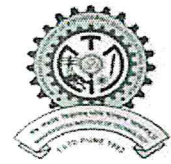
APIs	API Score allotted	Self-appraisal Score	API Score Verified by HoD	Remarks by Director / Dean / Principal
Category - I : Teaching, Learning & Evaluation Related Activities	100	100	100	
Category - II : Professional Development, Co-Curricular & Extension Activities	70	55	55	
Category - III : Research and Academic Contributions	90	13	13	
Category-IV: Other Related Activities	40	5	5	
<b>TOTAL</b>	300			
<b>Minimum Score required</b> ○ 40% - Tutors/BDS Staff ○ 50% - Lectures ○ 55% - Reader ○ 60% - Professor and HOD	120 150 165 180	173	173	

Signature of Faculty

Verified by HOD



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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**

**ADDITIONAL COMMENTS (if any) BY THE FACULTY**

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Date:

Signature of Faculty

**ASSESSMENT BY THE HOD (EA)**

(The assessment should be based predominantly on the criterion mentioned. The opinion of colleagues, subordinates, superiors will be given due weightage. The overall utility/ contribution of the candidate to the department and institute are assessed. In case of interdepartmental assignments, EA should seek remarks from the concerned HOD.)

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Date:

Name & Signature of HOD

**REVIEW OF ASSESSMENT & RECOMMENDATION BY THE DEAN / PRINCIPAL(RA)**

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Date:

Name & Signature  
External Assessor (IfAny)

Name & Signature  
Head of Institution





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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**



(Period of Appraisal: From January 2024 to Sept 2024)

**EMPLOYEE DETAILS:**

Name of the Faculty	:	Dr. Gauni M. Ugale,
Department	:	Periodontology
Designation	:	Professor
Date of Joining the Institute	:	01/06/2013
Employment ID	:	PERIOTEMP 047
Gross Salary	:	
Mobile No.	:	9130009068, 9637974180
E-mail ID	:	

**GUIDELINES:**

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7	Special Leave (SL)			

- Provide Details of the nature / purpose of Special Leaves (if applicable)



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d.	<b>Patient treatments and Routine clinical procedures performed</b> (as per instruction of HOD and Principal) 5 mark for minimum work/ 10 for moderate work/ 15 for maximum work/ 20 marks for exceptional performance)	20	20	20	
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<b>Total score</b>		100	100	100	

Signature of Faculty

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Sr. No.	Nature of Activity	API Score allotted	Self-appraisal Score	API Score Verified by HOD	Remarks by Director / Dean / Principal
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b.	<b>Professional development activities</b> such as participation in seminar / conferences / Workshops (5 Marks for each activity)	10	10.5	5	
c.	<b>Invited talks/lectures in refresher / faculty development courses / workshops / seminars / conferences</b> (5-Marks for each activity)	10	-	-	
d.	<b>Participation in Student related co-curricular, extension and field based activities.</b> (i) Discipline related co-curricular activities (e.g. remedial classes, career counseling, study visit, student seminar, Mentoring and other events) (ii) Other co-curricular activities (Cultural,sports, NSS, NCC, etc.) (iii) Extension and dissemination activities (public lectures /talks / field visits,etc). (5 Marks for each activity)	15	10	10	
e.	<b>Contribution in management and governing bodies of the department and institution through participation in institutional committees and administrative responsibilities.</b> (i) Administrative responsibility (including as dean /Principal/chairperson/convener/ teacher in-charge/similar other duties that require regular office hours for its discharge) (5 Marks) (ii) Substantial contribution in BOS, Academic, Administrative or other Committees.(5 Marks)	15	10 15	10	
<b>Total of (II)</b>		70	45	45	

Signature of Faculty

Verified by HOD





# Maharashtra Institute of Dental Sciences and Research (Dental College)

Vishwanathpuram Ambajogai Road, Latur 413512

## ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF



### CATEGORY – III: RESEARCH & ACADEMIC CONTRIBUTIONS

Sr. No.	Nature of Activity	API Score allotted	Self- appraisal Score	API Score Verified by HOD	Remarks by Director / Dean / Principal
1.	<b>Research Publications (Journals) as First/ second / corresponding author only</b> i. International journals (indexed in Pub Med / Scopus / Web of Science/ UGC Care) (5 Marks each) ii. National journals (indexed in Pub Med / Scopus / Web of Science / UGC Care list) (2.5 Marks each) iii. Other National / International Peer Reviewed Journal (1mark each)	15	2.5	2.5	
2.	<b>Research Publications other than journals articles (Books, Chapters in books)</b> International Publisher: 5 per book / chapter National Publisher: 2.5 per book / chapter	10	-	-	
3.	<b>Sponsored Projects</b> Minor Research Projects: 5 Each Major Projects: 10 Each	10	-	-	
4.	<b>Research Guidance</b> Ph.D. – 5 per student per year MD/MS – 2.5 per student per year	10	10	10	
5.	<b>Fellowship/ Awards</b> (International level: 5 each National level: 2.5 each)	10			
6.	<b>Papers presented in Conferences &amp; Seminars</b> International Level: 05 each paper National Level: 03 each paper State/ University Level: 02 each paper	10	05	05	
7.	<b>Development of e-learning content / material</b>	5	-	-	
8.	<b>Research Evaluation and Reviewers / Editors</b> Ph.D. (5), MD/MS (3), Journal/Conf. (2) Editors/Reviewer (2)	10	-	-	
9.	<b>Copyright (5) or Patents (10) registered</b>	10	5	5	
	<b>TOTAL (III)</b>	90	22.5	22.5	

Signature of Faculty

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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**



**CATEGORY-IV: OTHER RELATED ACTIVITIES**

Sr. No	Nature of Activity	API Score allotted	Self- appraisal Score	API Score Verified by HoD	Remarks by Director / Dean / Principal
a.	<b>Organizing of conferences / workshop</b> i. National – 10 per activity ii. State / regional – 5 per activity	10	05	05	
b.	<b>Participation in various Bodies of University or Government committees</b> i. National – 10 per activity ii. State / regional – 5 per activity	10	—	—	
c.	<b>Additional Qualification</b> (Degree / Diploma / Fellowship) received (10-International 5-National)	10	—	—	
d.	<b>Additional Duties</b> (as allotted by Trust / Management / Principal towards welfare of Institute / trust / campus)	10	10	10	
	<b>TOTAL (IV)</b>	40	15	15	

Signature of Faculty

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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**



**EVALUATION SUMMARY:**

APIs	API Score allotted	Self- appraisal Score	API Score Verified by HoD	Remarks by Director / Dean / Principal
<b>Category – I :</b> Teaching, Learning & Evaluation Related Activities	100	100	100	
<b>Category – II :</b> Professional Development, Co-Curricular & Extension Activities	70	45	45	
<b>Category – III :</b> Research and Academic Contributions	90	22.5	22.5	
<b>Category – IV :</b> Other Related Activities	40	15	15	
<b>TOTAL</b>	300	182.5	182.5	
<b>Minimum Score required</b> o 40% - Tutors/BDS Staff o 50% - Lectures o 55% - Reader o 60% - Professor and HOD	120 150 165 180			

Signature of Faculty

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**ANNUAL PERFORMANCE APPRAISAL FORM - TEACHING STAFF**



**ADDITIONAL COMMENTS (if any) BY THE FACULTY**

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Date:

**Signature of Faculty**

**ASSESSMENT BY THE HOD (EA)**

(The assessment should be based predominantly on the criterion mentioned. The opinion of colleagues, subordinates, superiors will be given due weightage. The overall utility/ contribution of the candidate to the department and institute are assessed. In case of interdepartmental assignments, EA should seek remarks from the concerned HOD.)

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Date:

**Name & Signature of HOD**

**REVIEW OF ASSESSMENT & RECOMMENDATION BY THE DEAN / PRINCIPAL(RA)**

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Date:

**Name & Signature  
External Assessor (IfAny)**

**Name & Signature  
Head of Institution**