Annexure XI: Probation completion form

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NAME:	CITIZENSHIP ID NO:				DESIGNATION:		
GRADE:	DIVISION:						
PROBATION START DATE:			PROBATION COMPLETION DATE:				
(dd/mm/yyyy)			(dd/mm/yyyy)				
Note:							
1. Please use Block Letter	rs and date form	at as m	entione	d above.			
2. While filling up the for much as possible.	rm, please keep i	't neat d	and clea	n as possi	ble. Avoid ove	rwriting as	
Give a brief description of to (Please attach extra sheet it		d out b	y the ca	andidate o	luring the Prol	bation Period	
Performance Rating							
Overall Performance	Unsatisfactory	Satisfactory		Good	Very Good	Outstanding	
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L							
Remarks:							
Recommendation for:							
Supervisor			Chief Executive Officer				