

INFORMATION TO BE PROVIDED FOR FORWARDING ONLINE APAR

APPRAISAL PERIOD FROM DATE:..... TO DATE:.....

1. NAME OF APPLICANT:
2. UID No.:.....
3. DESIGNATION:.....
4. EDUCATION:.....
5. MARRIED/SINGLE/DIVORCED/WIDOWED:.....
6. DATE OF CONTINUOUS APPOINTMENT:..... GRADE PAY:.....
7. SECTION IN WHICH WORKED IN APPRAISAL PERIOD:.....
8. LEAVES TAKEN DETAILS: EL:..... MEDICAL:.....
9. NAME & UID OF REPORTING:.....
10. NAME & UID OF REVIEWING:.....
11. NAME & UID OF COUNTERSIGNING OFFICER:.....
12. LAST IMMOVABLE PROPERTY RETURN SUBMISSION DATE:.....
13. MOBILE No.:.....
14. SIGNATURE:.....
15. DATE OF SUBMISSION:.....