

**Annexure 10: MERITORIOUS/FAST TRACK PROMOTION FORM**

Deserving employees who have completed 75% of actual time required in the present grade may be considered for meritorious/out of turn promotion, provided that the concerned Divisional Head justifies the nomination by completing the format specified below.

**Immediate Supervisor:** Please complete the following format most accurately as your statements, information and assessments shall be liable for further verification.

**A.**

<b>1</b>	<b>Name &amp; Employee ID No. of official proposed for meritorious promotion:</b>	
<b>2</b>	<b>Department, Division and Unit:</b>	
<b>3</b>	<b>Initial Appointment date:</b>	
<b>4</b>	<b>Entry Grade &amp; Designation:</b>	
<b>5</b>	<b>Last promotion date &amp; promoted grade</b>	
<b>6</b>	<b>Present Post Designation, Grade &amp; Qualification:</b>	
<b>7</b>	<b>Proposed Post Designation &amp; Grade:</b>	
<b>8</b>	<b>Name of immediate supervisor recommending the proposal:</b>	

**B1. Describe present responsibility of the official (if required attach separate sheet(s)):**

<b>Sl. No.</b>	<b>Present Responsibilities</b>	<b>Comments (To be filled by Supervisor)</b>
<b>1</b>		
<b>2</b>		
<b>3</b>		
<b>4</b>		

**B2. Three (3) recent years PMS rating to justify the Meritorious Promotion proposal:***(Copies of achieved rating should be attached)*

Sl.No	Year	Rating Achievement
Year 1		
Year 2		
Year 3		
Year 4		
Year 5		
Average	Rating for Three years	

**B3. Describe the proposed job very clearly** *(if required attach separate sheet (s)):*

**B4. Describe the potentials of the official to assume the responsibility of the proposed post** *(if required attach separate sheet (s)):*

**C1. Achievements/Impacts:**

*(Impacts may be described in terms of efficiency, economy or other improvements in Organizational operations). Normal functions/responsibilities to be excluded. If required, please attach extra sheet (s))*

Sl. #	Achievement category	List Achievements	Describe Achievement
1.	Special/Outstanding act or service in the public interests	1.	
		2.	
		3.	
2.	Suggestions	1.	
		2.	
		3.	
3.	Inventions/Innovative Ideas	1.	
		2.	
		3.	
4.	Other specific accomplishments/ Achievements	1.	
		2.	
		3.	

**C. 2. List documentary evidences for C (1), (if required attach separate sheet (s)):**

*As an immediate supervisor, I hereby certify that the above information and assessment are correct to the best of my knowledge. I understand that I am liable for further explanations and enquiry as deemed appropriate in the event that the above information is incomplete or incorrect.*

**Name** : \_\_\_\_\_

**Designation** : \_\_\_\_\_ **Date**: \_\_\_\_\_

*(Name & Designation of immediate Supervisor)*

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Recommendations of the Head of the Division *(if required attach separate sheet(s))*:

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**Name**: \_\_\_\_\_

**Designation**: \_\_\_\_\_

**Date** : \_\_\_\_\_

**Place** : \_\_\_\_\_

*(Signature, Name & Designation)*