



**JOMO KENYATTA UNIVERSITY
OF
AGRICULTURE AND TECHNOLOGY**

PERFORMANCE EVALUATION FORM

NOTE: Performance evaluation form duly completed should be forwarded under confidential cover by the Heads of Departments to Deputy Vice Chancellor (Administration).

PART ONE TO BE COMPLETED BY APPLICANT

I Prof. /Dr./Mr./Mrs/Ms./Miss.....

P/F.No.....Appointed on.....in.....Department on

a.....years(s)/months contract apply for renewal of my contract for another period of
year(s)/months.

Signature:..... Date:.....

PART TWO TO BE COMPLETED BY SUPERVISOR/COD/HOD/DIRECTOR/DEAN/PRINCIPAL

I do/do not recommend renewal of contract (Give reasons/comments)

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Signature:..... Date:.....

DEPUTY VICE CHANCELLOR (ADMINISTRATION)

I approve/do not approve the renewal of his/her contract based on the evaluation above.

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Signature:..... Date:.....
DEPUTY VICE CHANCELLOR (ADMINISTRATION)