National University
of Computer and Emerging Sciences
Employee Confirmation Form

Employee Information (to be filled by Reporting Officer)

Name:		Emp ID:	
Designation:		Campus:	
Department:		DOJ:	
Teacher training workshop:☐ Attended ☐ Not attended		Confirmation date:	

Reporting Officer

Rating Scale – 1 … 5 (Poor to Outstanding)		
KPIs	Comments	Points
1. Quality of Work		/5
2. Quantity of Work		/5
3. Timeliness of Output		/5
4. Punctuality		/5
5. Team Work		/5
6. Initiative & Drive		/5
		/30

Remarks:_____

Name: _____ Signature: _____ Date: _____

Campus Recommendations

		Signature	Date
Campus HR	Name: _____		
Remarks: _____			
Director	Name: _____		
Remarks: _____			

Head Office

HR-HQ	Name: _____		
Remarks: _____			
Registrar			
Remarks: _____			

Rector	☐ Approved ☐ Not Approved	Signature: _____	Date: _____

Remarks: