

ROYAL GOVERNMENT OF BHUTAN Royal University of Bhutan



Promotion Form

EMPLOYEE ID No.:

Name:						
Sex: M	F					
Date of birth:		Day	Month	Year	Nation	ality:
Citizenship Card No.:				Date of issue:		Place of issue
Full Postal House No.:			Village:		Thromde:	
Address:						
	Thi	ram No.:		Gewog:		Dzongkhag:
Particulars:	Na	me:		Nationa	lity:	Occupation and
						Address:
(i) Father						
(ii) Mother						
(iii) Spouse						

EDUCATION: Academic and Training (please start from the Institute last attended)

Name of School/	Location	Field of	Subj	ects	Dι	ıration	Degree/
College/Training	a n d	Study					Diploma
Institute	Country				Start	End	Certificate
					Date	Date	obtained
а							
b							
С							
d							
Research/ Public	ation:						
Title		Date Purpo		ose			
a							
b							
c.							
State whether select	ed in the RC	SC (1983-	2004)/	Civil S	Service (Common Ex	kamination
(2005 -2009) and B	CSE (2010	onwards).	If selec	cted, s	tate the	year of sel	ection and
position ranking:							
a. Year of selection: b. Merit Rank:							

2. Position Level:				
4. Pay Scale:				
6. Sub-Group:				
on.				
ffice				
rder No.				
Date				
Long term training/Higher studies availed: Duration: From:				
of				

promotion:.....

appointment:....

PERFORMANCE – Ratings for the past three years: (each out of the total factors) copies of performance evaluation reports should be attached.					
Year	_	Good	Very Good	Outstanding	
TCai	Improvement Needed	dood	very dood	Outstanding	
1 Position 3. Sub-le	ROMOTON RECOMMEN n Title:vel Occupational Group:	2. Position Lev 4. Pay Scale: .			
(ii) Is	the proposed promoti	ion against th	e approved post?	,	
(iii) State whether the candidate fully matches the job requirements of the post:					
Informa	ation verified by HR Of	fficer/Chief H	R Officer of Agen	cy	
Date					
			Signature	:	
		:	Name & Positio	n Title	
(Official	l Seal)				

Recommendation of the Agency	
	shed in this form has been verified and is
found correct and that there is no adver	se report against him during the past three
years.	
D 4	0.
Date	Signature Name & Position Title
	of the recommending authority
Recommendation/Decision of the A	
IID Committee	Chairperson,
HR Committee	
Date Sign	nature
Date Sign	
Information verified by RUB:	
Name of the HRO, HRMD	Name of the Chief HRO, HRMD
(Official Seal)	(Official Seal)
Date:	Date:
Date.	Date.
Decision of the RUB (reference of the Co	mmission Meeting No dated
	animotori nacemis nei uatea
Approved w. e. f. Date	Ionth Year
Approved w. e. f. Date M. Not approved:	Ionth Year
	Ionth Year
Not approved:	Ionth Year