



ལྷོ། འབྲུག་བཟའ་སྲོད་ལས་འཛིན་ཚད།
FOOD CORPORATION OF BHUTAN LIMITED
Corporate Headquarters



PERFORMANCE RECOMMENDATION FORM

Name		Position Title	
Position Level		Division/Region	
Place of Posting		Date of Appointed	
Probation Completion Date		Confirmation Date	

Note: Please fill up the form in keeping with the Employment Chapter of FCB Service Rule 2013. It should be kept neat and clean and legible as far as possible with no over writing. Please enclose Medical Fitness Certificate along with the form.

<p>Give a brief description of the roles and responsibilities that the candidate had shouldered during his/her attachment period with particular emphasis on Competence, Character, Aptitude, Discipline and Suitability (Please attach extra sheet if required).</p>				
Overall Performance Rating (Please Tick)				
Unsatisfactory	Satisfactory	Good	Very Good	Outstanding
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendation for:				
<p>(Name and Signature of the Immediate Supervisor)</p>				
Endorsement of the Head of the Division:				
<p>(Name and Signature of the HoD)</p>				