**McPHERSON UNIVERSITY, SERIKI SOTAYO, OGUN STATE**

 

**RECOMMENDATION FOR CONFIRMATION OF APPOINTMENTS, 2024/2025.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **S/N** | **Name** | **School/****Department** | **Status** | **Date of Appt.** | **Effective date of Confirmation** | **A&PC (A) Sub-Committee Recommendation** | **A&PC Decision** |
|  | **COLLEGE ………………………………………………………………** |  |  |  |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
|  | **COLLEGE…………………………………………………………….**  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |
|  | **COLLEGE …………………………………….………………………**  |  |  |  |
| 9 |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |
|  | **COLLEGE OF ……………………………………………………………….. (………………………)** |  |  |  |
| 15 |  |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |  |
| 17 |  |  |  |  |  |  |  |
| 18 |  |  |  |  |  |  |  |
| 19 |  |  |  |  |  |  |  |
|  | **COLLEGE OF ……………………………………………………………….. (…………………..)** |  |  |  |
| 20 |  |  |  |  |  |  |  |
| 21 |  |  |  |  |  |  |  |
| 22 |  |  |  |  |  |  |  |
| 23 |  |  |  |  |  |  |  |
| 24 |  |  |  |  |  |  |  |
| 25 |  |  |  |  |  |  |  |

\* Rec. – Recommended for confirmation of appointment till retiring age.