

NO DUE FORM (EMPLOYEE PROMOTION)

**Name………………………………………………Position Title……………………………...............**

**Department/Division/Unit/Region………………….…………………………….Date…………**

| **SN** | **Head of Department/ Division/Unit/Region** | **Any Due/Comment** | **Signature** |
| --- | --- | --- | --- |
| 1 | **Acting Director (DoCS)** |  |  |
| 2 | **GeneralManager,**ICT& Research Division (ICTRD) |  |  |
| 3 | **Head,**Finance&Accounts Division (FAD) |  |  |
| 4 | **General Manager**Food & Essential Commodity Division(FECD) |  |  |
| 5 | **Head**, Agricultural Marketing Division(AMD) |  |  |
| 6 | **Head,**Legal Unit |  |  |
| 7 | **Head,**Internal Audit Unit |  |  |
| 8 | **Regional Director** (*only for regions*) |  |  |

