

**PROPOSER/SUPPORTER REPORT FORM FOR PROCUREMENT/SUPPLIES
PROFESSIONAL AND TECHNICIAN REGISTRATION**



I. This section is to be completed by the applicant.

After filling out this section, please give this form to each of your Supporters and Proposers

Applicant's Name:.....

Applicant's Address:.....

Application for registration as:.....

Date of Birth:.....

Contact Telephone Number:..... Fax Number:..... E-mail:.....

I hereby authorise (name):.....to provide the information requested in this document.

Applicant's Signature:..... Date:.....

II. This Section is to be completed by Proposer/supporter

PSPTB would appreciate your assessment of the applicant's qualities. The Board will use your appraisal only in the evaluation of the professional registration and its confidentiality will be safeguarded.

Supporters' reference forms must be stamped with official stamp/seal.

Please complete this form and return it in registered mail/Courier Service to:

Executive Director,
Procurement and Supplies Professionals and Technicians Board,
P.O. Box 5993,
DAR ES SALAAM.

1. General Ratings

Please indicate your opinion of this applicant in the context in which you know him or her. Your assessment should be indicated in each case ticking off the appropriate check box.

1.1 In your view, how does the applicant rate on the following personal characteristics:

Motivation:

Very high High Above Average Below Average Low Very Low Not Known

Self Discipline:

Very high High Above Average Below Average Low Very Low Not Known

Leadership:

Very high High Above Average Below Average Low Very Low Not Known

Self-Confidence:

Very high High Above Average Below Average Low Very Low Not Known

Reliability:

Very high High Above Average Below Average Low Very Low Not Known

Proficiency:

Very high High Above Average Below Average Low Very Low Not Known

1.2 Known only through Records Screen Occasionally Known Personally

1.3 **Please indicate how long you have known the applicant:**

- Less than 1 Year 1 – 3 Years Over 3 years

1.4 The applicant has known to you as:

- An employee A subordinate Colleague A friend An acquaintance

2. **Specific Comments:**

2.1 What do you see as the personal strengths of the applicant?

2.2 In your view, what weaknesses might the applicant show?

2.3 PSPTB would appreciate your overall assessment of the applicant’s proficiency and personal qualities:

III. Proposer/Supporter Particulars:

Proposer/Supporter’s Name and professional registration number (if any):

Proposer’s/Supporter’s Employer/Institution:

Position:

Address:

Recommendation for registration:

Contact Telephone Number: Fax Number: E-mail:

Proposer/Supporter’s Signature:.....Official Stamp (if any):Date:.....