RETURN OF EXERCISE OF DELEGATED POWERS FOR THE PERIOD

01.07.06 TO 30.09.06

*CENTRAL ADMINISTRATIVE SERVICES TOBAGO/*TOBAGO HOUSE OF ASSEMBLY EDUCATION (*delete as appropriate)

CONFIRMATION OF APPOINTMENTS

Name of Officer Date of *Appointment/ *Promotion (*delete as appropriate)	Original Medical Certificate forwarded to DPA	Probationary Period served	First Report Forwarded to DPA	Interim Report Forwarded to DPA	Final Report	Remarks
Mr. Phillip John, Mechanical Engineer II	If promotion N/A If appointment, Yes	Yes	Yes	If promotion N/A If appointment, Yes	Yes	
12.09.05						

Approved

Date.....(*delete as appropriate)

^{*}Permanent Secretary, Office of the Prime Minister (CAST)/*Chief Administrator, Tobago House of Assembly