|  |  |
| --- | --- |
| Name |  |
| Job title |  |
| Department |  |
| Head of Department |  |
| What are you applying for | Select one |
| Accelerated increment |  |
| Contribution point |  |
| Individual award |  |

|  |  |
| --- | --- |
| Have you successfully completed your probationary period? | Yes / no |
| Have you made a previous application under this scheme? | Yes / no Year of application: |
| Has your role been subject to HERA review in last 2 years? |  |
| Please highlight if there are any special circumstances to be taken into account when considering the application, for example:  Part time hours, maternity leave |  |

**You are advised to read the Guidance notes for Professional Support staff before completing this application.**

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| --- | --- |
| Criteria | Describe your contribution and its impact in at least one of the following areas and provide supporting evidence where relevant: |
| An outstanding student experience |  |
| Sustainable development; excellent facilities |  |
| Generating knowledge and promoting enterprise |  |
| Contribution to the region |  |
| High achieving staff in a well led University |  |

**For completion by Head of Department**

Checklist for contribution point or accelerated increment:

|  |  |
| --- | --- |
| Has the activity taken place during the previous 24 months ? |  |
| Is the contribution outstanding, sustained and over and above the normal expectations for the role? |  |
| Does the contribution help meet institutional objectives? |  |
| Is there evidence to demonstrate that the impact of the activity is high, ongoing and sustainable? |  |
| Is there sufficient evidence to demonstrate that impact has been sustained for at least 6 months and is likely to continue for another 24 months? |  |

Checklist for individual one-off payment:

|  |  |
| --- | --- |
| Has the activity taken place during the previous 12 months? |  |
| Is the contribution specific additional duties or projects over and above the normal expectations for the role? |  |
| Does the contribution help meet institutional objectives? |  |
| Is there evidence to demonstrate the impact of the activity? |  |

**Assessment by Head of Department**

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| --- |
| Please provide confirmation that you agree with the evidence as submitted in the application and that the application meets the required criteria of the Reward Scheme.  If not recommended for application, please provide brief written feedback in this field. Please note that this feedback will be shared with the applicants  **Signed:**  **Date:** |

**Notes to applicant:**

**Applications, including any additional appendices, should not exceed 10 pages.**

**Please submit the completed application form to** [**rewards2017@worc.ac.uk**](mailto:rewards2017@worc.ac.uk) **by 4pm on Friday 19th January 2018.**