

**APPLICATION FORM FOR TRANSFER
FROM ACP (RESEARCH AND TEACHING) TO ACP (TEACHING & SCHOLARSHIP)**

**SECTION 1: TO BE COMPLETED BY THE APPLICANT BEFORE SUBMISSION TO THEIR HEAD
OF INSTITUTION**

Please ensure you read the following documents before completing this form:

- ACP: Process for transfers between the academic career pathways
- ACP (T&S) Additional Eligibility Criteria

Applicant Details			
Title		Forename(s)	
Surname		Professional surname (if applicable)	
Personal Reference Number (8-digit) (this can be found on your payslip)			
Email address			
Position/Job title			
Institution (Department/Faculty)		School (e.g. School of Arts & Humanities)	
College (if applicable) This is the College of which you are a Member or Fellow.			

Curriculum Vitae

Please submit a copy of your CV with this application form. This should be a concise CV of not more than two sides of A4 (500 words), including any annotations. It should normally include the following sections:

- Professional History
- Education and Qualifications
- Appointments and Affiliations
- Prizes, Awards and Honours

If you wish, you may also provide separately:

- a list of your publications, such as peer-reviewed journal articles, book reviews, books, book chapters, online published teaching or learning resources. The list should be in a clear chronological order, stating for each publication (including any books) the year of publication, and page numbers and number of pages (where available). Peer-reviewed publications should be listed separately.
- details of major grants and contracts awarded, both current and over the last 5 years.

Please tick this box to indicate you have attached your CV.	<input type="checkbox"/>
Please tick this box to indicate you have attached a separate list of your publications.	<input type="checkbox"/>
Please tick this box to indicate you have attached a separate list of grants and contracts awarded.	<input type="checkbox"/>

Case for Transfer

Please provide a statement setting out the reasons you consider it appropriate to transfer to the Academic (Teaching & Scholarship) Career Pathway. It should include evidence of your excellence and achievements in teaching and scholarship and a summary of your teaching plans.

--

Additional Eligibility Criteria

Please provide evidence of how you meet the Academic (Teaching & Scholarship) Additional Eligibility Criteria.

--

Referee Details

Please provide the names, titles and contact details of at least two referees to comment on your application.

FIRST REFEREE

Title	
Forename	
Surname	
Position	
Organisation	
Email address	

SECOND REFEREE

Title	
Forename	
Surname	
Position	
Organisation	
Email address	

RESERVE REFEREE

Title	
Forename	
Surname	
Position	
Organisation	

Email address	
----------------------	--

Applicant Signature	
Please sign and date the form before submitting to your Head of Institution. A typed signature is sufficient.	
Signature	
Date	

SECTION 2: TO BE COMPLETED BY THE APPLICANT'S INSTITUTION

Head of Institution Recommendation	
Please indicate whether or not you support this individual's application to transfer to the ACP T&S. In your statement, please take into account the strategic and operational needs of the Institution (including resource considerations, research strategies and teaching requirements).	
You should be satisfied that the applicant is the best possible candidate as if you were appointing them in a competitive process, referring to:	
<ul style="list-style-type: none"> • the individual's career development and suitability for appointment to a T&S role; • your normal selection criteria for a similar post, and • the probation and/or promotion criteria for the relevant grade. 	
Do you support the individual's application to transfer? (Please delete as appropriate)	Yes/No
If not, are you creating a new post to be advertised? (Please delete as appropriate)	Yes/No
Please provide a statement setting out the reasons for your recommendation in full.	

Hol Signature

Please sign and date the form before sending to your Head of School.

Form completed by:

(A typed signature is sufficient.)

Job Title:**Date****SECTION 3: TO BE COMPLETED BY THE APPLICANT'S SCHOOL****Head of School Recommendation**

Please indicate whether or not you support this individual's application to transfer to the ACP T&S. In your

statement, please take into account the strategic and operational needs of the Institution (including resource considerations, research strategies and teaching requirements).

You should be satisfied that the applicant is the best possible candidate as if you were appointing them in a competitive process, referring to:

- the individual's career development and suitability for appointment to a T&S role;
- your normal selection criteria for a similar post, and
- the probation and/or promotion criteria for the relevant grade.

Do you support the individual's application to transfer? (Please delete as appropriate)

Yes/No

If not, are you creating a new post to be advertised? (Please delete as appropriate)

Yes/No

Please provide a statement setting out the reasons for your recommendation in full.

HoS Signature

Please sign and date the form before sending to your Lead HR Business Partner.

Form completed by:

(A typed signature is sufficient.)

Job Title

Date

SECTION 4: TO BE COMPLETED BY THE HR COMMITTEE SUB-COMMITTEE

HRC Sub-Committee Recommendation

Is this application supported? (Please delete as appropriate)	Yes/No
If not supported, please provide a statement setting out the reasons for this decision, for the applicant's information.	

HRC SC Signature	
Form completed by: (A typed signature is sufficient.)	
Job Title:	
Date	