# DOCUMENT 9 PRO FORMA FC MINUTES Annex 3

**LISTS OF CANDIDATES**

**Applications for promotion from 1st October 2020**

**PROFESSORSHIPS**

**Summary List**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Applicant** | **Score and Banding\*** | **Overall Score****(max 100)** | **Rank** | **Meets****Standard** **(Y/N)** |
| **R/S****Score Band****(1-50)** | **T****Score Band****(1-30)** | **GC****Score Band****(1-20)** |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **[Name]** |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

\* Performance Descriptors: OE, SE, CE, IE, CU

**READERSHIPS**

**Summary List**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Applicant** | **Score and Banding\*** | **Overall Score****(max 100)** | **Rank** | **Meets****Standard** **(Y/N)** |
| **R/S****Score Band****(1-50)** | **T****Score Band****(1-30)** | **GC****Score Band****(1-20)** |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **[Name]** |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |

\* Performance Descriptors: OE, SE, CE, IE, CU

**UNIVERSITY SENIOR LECTURESHIPS**

**Summary List**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Applicant** | **Score and Banding\*** | **Overall Score****(max 24)** | **Rank** | **Meets****Standard** **(Y/N)** |
| **R/S****Score Band****(1-4)** | **T****Score Band****(1-10)** | **GC****Score Band****(1-10)** |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **[Name]** |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

\* Performance Descriptors: OE, SE, CE, IE, CU

\*\* Research/Scholarship: Score range of 1- 4 will be applied

**CONTRIBUTION REWARD SCHEME FOR SENIOR LECTURERS**

**Summary List**

It was agreed that, on the basis of the evidence before the Committee, a contribution award should be

made to the candidates listed below according to the strength of their case:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Applicant** | **Department/Faculty** | **Ranking****Ra** | **Number of****Increments** **Applied for****(1 or 2)\*** | **Number of** **Increments** **Approved****(1 or 2)\*\*** |
| **[Name]** |  | 1 |  |  |
|  |  |  |  |  |
| **[Name]** |  | 2 |  |  |
|  |  |  |  |  |

*[Note:*

*\*Most successful proposals will result in the award of one contribution increment. Exceptional cases*

*need to be made for the award of 2 increments.*

*\*\*If the number approved differs from that proposed, the reasons for this variance should be set out in the comments concerning this candidate]*

**Please sign and date this list:**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Faculty Committee Chair)