**NOMINATION FORM**

Please ensure you read the [scheme guidance](https://www.hr.admin.cam.ac.uk/pay-benefits/pay-and-reward/reward-policies/reward-schemes/contribution-reward-scheme-academic) before completing this form.

This nomination must be submitted to the HR Reward Team at [CRSGrade12@admin.cam.ac.uk](mailto:CRSGrade12@admin.cam.ac.uk)

by **22 October 2025**

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| **Section A: Details of employee being nominated for an award** | | | | |
| **Is this a manager-led nomination or a self-nomination?** | | | Choose an item. | |
| **Title** |  | | | |
| **Forename(s)** |  | | | |
| **Surname** |  | | | |
| **Personal Reference Number (8-digit)** |  | | | |
| **Email address** |  | | | |
| **Current position title** |  | | | |
| **Current Department/Faculty/ /Division** |  | | | |
| **Current Grade/Band** | Choose an item. | **Current Spine Point** | |  |
| **Details of any current Market Pay arrangements, including amount and end date** |  | | | |
| **Details of any other allowances, including description and amount** |  | | | |
| **Appointment start date**  *(in current post)* |  | **Appointment end date** *(if applicable)* | |  |
| **What type of award is being requested?** | | | | Choose an item. |
| **Has the employee had an appraisal meeting in the last 12 months?** | | | | Choose an item. |

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| **Details of the nominee’s line manager** | | |
| **Title** |  | |
| **Forename(s)** |  | |
| **Surname** |  | |
| **Email address** |  | |
| **Section B: Details of the case for an award (to be completed by the employee, when submitting a self-nomination for an award)**  Please set out in full below the reasons for this self-nomination, including where relevant reference to your most recent appraisal meeting. Please attach your most recent appraisal paperwork to this nomination form, where possible. | | |
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| **Signature** *(an electronic signature is sufficient)* | |  |
| **Date** | |  |

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| **Section C: Details of the case for an award (to be completed by the line manager)**  When nominating a member of your team, please set out in full below the reasons for this nomination, including where relevant reference to the employee’s most recent appraisal meeting. Please attach the nominee’s most recent appraisal paperwork to this nomination form, where possible.  When commenting on a self-nomination from a member of your team, please comment on the details provided by the employee and their contribution, confirming whether or not you are supportive of the proposed award. | | |
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| **If this is an employee-led nomination, do you support the nomination?** | | Choose an item. |
| **If this is a manager-led nomination, what award do you support?** | | Choose an item. |
| **Please confirm if there is sufficient funding to support this award** | | Choose an item. |
| **Signature** *(an electronic signature is sufficient)* |  | |
| **Date** |  | |

**IMPORTANT:** Please do not complete **Section D**: it will besent to the Senior Reviewer to complete by the HR Reward Team.

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| **Section D: Senior Reviewer Comments**  To be completed by the Senior Reviewer. Note, if you are both the line manager and the Senior Reviewer, please indicate whether or not you support the nomination, and the proposed award only and sign this section. | |
| **Name of nominee** |  |
| **Do you support this nomination?** | Choose an item. |
| **If you support the nomination, what type of award do you support?** | Choose an item. |
| **Cost of the proposed award (including on-costs)**  *(This information has been provided to you by the HR Reward Team)* |  |
| **Comments of the Senior Reviewer**  Please set out in full below the reasons you do or do not support this nomination, including where relevant justification for supporting the award of more than one increment. | |
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| **Name of Senior Reviewer** |  |
| **Signature** *(an electronic signature is sufficient)* |  |
| **Date** |  |