**Reward scheme – application for Professional Services team award**

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| Name of lead editor |  |
| Names of all applicants to be considered for team award (max 15) |  |
| Department |  |
| Head of Department |  |

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| --- | --- |
| Has each member of the team successfully completed their probationary period? | Yes / no |
| Have any of the applicants made a previous application under this scheme? | Yes / no Year of application: |
| Have any of the applicants’ roles been subject to HERA review in last 2 years? | Yes / no |
|  |  |
| Which academic year is the application for: | see guidance 1.9 “reference period”. Select one |
| 2017/2018 |  |
| 2018/2019 |  |

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

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| Criteria | Describe the 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 |  |

**To be completed by Head of Department**

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| Has the activity taken place during the preceding 12 months to the relevant academic year (stated above) ? |  |
| Is the contribution joint activity with measurable impact? |  |
| Are the applicants an identifiable team? |  |
| Is there evidence of activity that meets the institutional objectives? |  |
| Is the effect of the contribution extraordinary and demonstrably greater than outcomes already set out in the departmental responses to the strategic plan? |  |
| Is there evidence to demonstrate the value of the activity and its impact within the organisation in the short, medium or long term? |  |
| Is a non-financial reward proposed? Please give details: |  |

**Assessment by Head of Department**

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| Please provide confirmation that the evidence as submitted in the application is accurate and that, in your view, 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 applicants:**

Applications should not exceed FIVE pages.

Please submit the completed application form to [rewards@worc.ac.uk](mailto:rewards@worc.ac.uk) by 9am Monday 1st July 2019.

This section to be retained by HR

**Applicant name:**

**Equality-related circumstances** (see guidance notes 3.8)

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| In this section you may declare information about any equality-related circumstances that may have affected team members’ ability to meet the criteria. Please refer to the guidance 3.7. The following circumstances may be taken into consideration:   * Part time employment – please indicate FTE and the dates of any changes, and how this has had an impact on your work * Career break or secondment outside of the higher education sector – please provide dates and duration * Maternity leave, statutory adoption leave, and additional paternity leave (taken by partners of new mothers or co-adopters) – please provide dates and duration * Disability (including conditions such as cancer and chronic fatigue) – please indicate how this has had an impact on your work, including dates of any periods of leave * Ill health or injury - please indicate how this has had an impact on your work, including dates of any periods of leave * Mental health conditions - please indicate how this has had an impact on your work, including dates of any periods of leave * Constraints relating to pregnancy, maternity, breastfeeding, adoption, paternity or childcare in addition to periods of maternity, statutory adoption or additional paternity leave taken. This could include for example, pregnancy related illness and health and safety restrictions in laboratory and field work. * Other caring responsibilities (including caring for an elderly or disabled relative) * Gender reassignment |  |