**Departmental Form**

***The Department completes this form*** and sends it to the Academic Progression Coordinator, ***by e-mail*** to ac.pro@imperial.ac.uk

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| Section 1: Details of Application |
| All sections must be completed by the Department.  |
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| **Title and Full Name of Candidate:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **Department:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **Title of Current Appointment:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **Or Title of Honorary Association:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
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| **Level of promotion being applied for:** |
|   |
|  [ ]  Senior Research Fellow / Senior Researcher  | [ ]  Principal Research Fellow / Principal Researcher | [ ]  Professor of Practice  (Honorary) |
| [ ]  Senior Lecturer   | [ ]  Reader  (Clinical, Non-Clinical and Education) |  |
|  |  |  |
| [ ]  Associate Professor (Business School) | [ ]  Professor (Clinical, Non-Clinical, Education and Business School) |  |
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| **Proposed conferred title (applies only to Reader, Associate Professor (Business School), Professor and Professor of Practice (Honorary) applicants):[[1]](#footnote-1)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **For Lecturers and Assistant Professors (Business School) applying for promotion**: |
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| Date probation completed / to be completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Completion Date of **CASLAT, PGCert,** or **Learning & Teaching Development Programme (LTDP)**: **­­­­­­­­­­­­­­­­­­­­**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Note: A check will be undertaken on whether teaching quality requirements have been met.** |
| **Please indicate if:** |
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| This application is supported by the Department  [ ]   |
|   |
| This is a personal application **not** supported by the Department  [ ]  |
| If the application is not supported, the Head of Department will provide a brief statement explaining the Departmental Review Panel’s reasons for this decision. |
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| **Funding:** |
|  |
| The candidate’s post funded from the Departmental vote: Yes [ ]  No [ ]  |
| If no, please give name of funding body and account number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **The candidate is a:** | Imperial Employee  [ ]  |  |
|  | NHS Trust Employee  [ ] Research Council Employee [ ]  |  |
|  |  |  |
| **For Faculty of Medicine candidates:**  |
| **Applicant’s current post is:**  | Clinical  [ ]  |  |
|  | Non-clinical [ ]  |  |
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| **The Head of Department confirms:**1. I confirm that this application was considered at a Departmental meeting in line with Imperial’s procedures for the level of promotion sought (see Section B of the Guidance Notes).
2. I have reviewed the performance of the Candidate against Imperial’s Values and Behaviours Framework and concur with the statement included in the Application for Promotion prepared by the Candidate. I have further considered the impact of such contributions on the workload of the Candidate[[2]](#footnote-2).
3. I have considered the impact of COVID-19 on the work of the Candidate and reported relevant findings in my citation.

Signed (Head of Department)…………………………………………………… Date……………………….. |
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| **Section 2: Review Panel Composition**Please provide the names of those who sat on the Departmental Review Panel. Refer to pages seven and eight in the Guidance Notes regarding the required Departmental Review Panel Composition. If in doubt, contact the Assistant Provost (Academic Promotions) for advice.**Review Panel Members’ Names:** |
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |
| 6. |
| 7. |
| 8. |
| 9. |

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| Section 3: Departmental Referees |
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| To be completed by the Head of Department. **Please see Section E of the Guidance Notes.** |
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| The status of referees must be appropriate to the promotion sought and should reflect national and international recognition for more senior positions (e.g. indicate if the referee is Assistant, Associate or Full Professor). Imperial also values diversity where possible. Referees, both personal and departmental, should be chosen from academics who are not currently at Imperial and who have not been closely associated with the candidate in the last five years. Examples of close association include joint publications or shared research projects (See Section E of the Guidance Notes). The faculty-based referee selection panels will reject inappropriate recommendations. If in doubt, please seek advice from (Pro-) Consuls prior to submission as seeking replacements can cause delays. The Departmental Review Panel recommends that the following referees be approached. |
| 1. Name:

Address:Email: Appointment/Status (e.g. Full Professor): The referee has been contacted [ ]  and accepted the nomination [ ] .1. Name:

Address:Email: Appointment/Status (e.g. Full Professor): The referee has been contacted [ ]  and accepted the nomination [ ] .1. Name:

Address:Email: Appointment/Status (e.g. Full Professor): The referee has been contacted [ ]  and accepted the nomination [ ] .1. Name:

Address:Email: Appointment/Status (e.g. Full Professor): The referee has been contacted [ ]  and accepted the nomination [ ] .1. Name:

Address:Email: Appointment/Status (e.g. Full Professor): The referee has been contacted [ ]  and accepted the nomination [ ] .Signed (Head of Department)………………………………………………… Date……………………….. |
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1. **Note:** Professor of Practice titles should incorporate the subject area in brackets, e.g. “Professor of Practice (Neurosurgery)” [↑](#footnote-ref-1)
2. Please note that Values and Behaviours Framework replaced Imperial Expectations from November 2021 and that the current academic year remains part of the transition period. [↑](#footnote-ref-2)