ANNEX 2A: End of Year/Term Assessment

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PD.PROB.R1

RECORD OF PROBATION FOR NON-CLINICAL ACADEMIC STAFF

This document will be strictly confidential to those involved in the assessment of the probation, including Appointments Committees

Surname	Forename((s)		Title			
Faculty/Department	Date of Ap	ppointment Te		Ferm/Year			
CRITERIA (these should include any essential development activities identified by the Head of Institution after consultation with the probationer)		Satisfactory	Not Satisfactory	Con	nments		
Teaching (including examining)							
Research							
General Contribution							
Signature of Head of Department/Appra			Date				
Comments by Probationer							
Signature			Date				

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Please complete a sheet for each year/term of probation with any additional comments and/or supporting statements attached	7

Annex 2B: Final Assessment

CONFIDE	NTIAL			PD.PROB.A1			
PROBATION FOR NON-CLINICAL ACADEMIC STAFF FINAL ASSESSMENT							
This document will be strictly confidential to those involved in the assessment of the probation, including Appointments Committees							
Surname		Forename(s)		Title			
Office		Faculty/Dep	artment				
Statement by Head of Department/Appraiser (this should include confirmation that the probationer has participated in all 'core' development activities identified)							
Signature			Date				
Comments by Probationer							
Signature			Date				
To be completed by the Head of Department							
		Confirm Appointment	Extend Probation	Non-Confirmation			
Recommendation Appointmende	ndation to ents Committee						