

**ACADEMIC PROBATION REPORT**

Full Name:       Staff (E) Number:

Job Title:       School:

Date of Appointment:       Length of Probationary Period:

Single Pay Spine Point:

Report Period (for ease of reference please see attached calculation table):

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| --- |
| Probationary Period: First  First and Final  *(please tick as appropriate)*  Second  Final |

The Terms and Conditions of Employment for Academic Staff provide that the Academic Probation Committee will, prior to each anniversary of the probationers appointment, receive annually from each designated member of staff a report on the progress of each probationer for whom he or she has responsibility and determine:

during the first year

(a) whether progress is satisfactory

(b) whether progress is unsatisfactory or requiring remedial action

during the second year

(a) whether progress is satisfactory

(b) whether progress is unsatisfactory or requiring remedial action

(c) whether the appointment will be terminated at the end of the current year

during the first and final/final year of probation

(a) whether the appointment will be confirmed; or

(b) whether the appointment will be terminated at the end of the current year; or

(c) whether the probationer will remain on probation for a further year.

**ACADEMIC PROBATION REPORT FOR THE PERIOD**

HEADS OF SCHOOLS ARE RESPONSIBLE FOR THE COMPLETION OF SECTIONS 1 TO 7 INCLUSIVE

FORMS MUST NOT BE COMPLETED BY MEMBERS OF STAFF

PLEASE APPEND A BRIEF UP-TO-DATE CURRICULUM VITAE

**SECTION 1 - OBJECTIVES**

1. **Indicate under (a), (b) and (c) work assigned and objectives set for this reporting period.**

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| **(a) TEACHING** |
| **(b) EXAMINING** |
| **(c) SUPERVISION OF STUDENTS** |

1. **Extent to which objectives under (a), (b) and (c) above have been met (identifying performance indicators used).**

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| --- |
| **(a) TEACHING** |
| **(b) EXAMINING** |
| **(c) SUPERVISION OF STUDENTS** |

1. **Objectives set for the next reporting period. Objectives identified within the final report will be considered during the first appraisal.**

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1. **State the average number of contact hours per week spent on University Teaching and Related Activity during this reporting period.**

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| --- | --- | --- |
| **UNIVERSITY TEACHING AND RELATED ACTIVITY** | **AVERAGE HOURS** | |
| **Base Campus** | **Other Campus or Elsewhere** |
| **LECTURING** |  |  |
| **TUTORIALS** |  |  |
| **SEMINARS** |  |  |
| **PROJECT OR DISSERTATION SUPERVISION** |  |  |
| **LAB ACTIVITY** |  |  |
| **E-LEARNING** |  |  |

**SECTION 2 - RESEARCH AND ANALOGOUS ACTIVITIES**

Use strict definitions of research and analogous activities as defined by the Academic Publications Committee (see guidance note). Please be specific.

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| **(a) Objectives set for this reporting period.** |
| **(b) Extent to which the above objectives have been met** |
| **(c ) Extent to which objectives have been met since start of probation**  **unless covered in (b)** |
| 1. **Objectives set for the next reporting period. Objectives identified within the final report will be considered during the first appraisal.** |

**SECTION 3 – ADMINISTRATIVE TASKS**

**Describe specific tasks assigned; how they have been performed during this reporting period, and new tasks set for the next reporting period.**

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**SECTION 4 – WORKING RELATIONSHIPS**

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**SECTION 5 – STAFF DEVELOPMENT**

1. **Specify the outcome of training or retraining in this reporting period. Identify any training or retraining proposed in the next reporting period.**

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1. **CPD FRAMEWORK REQUIREMENTS**

**(see** [**http://staffdev.ulster.ac.uk/index.php?/higher\_education\_practice**](http://staffdev.ulster.ac.uk/index.php?/higher_education_practice) **for details)**

**Academic Induction (session names have changed from September 2010)**

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| --- | --- |
| **Session** | **Date Attended/ Attendance Scheduled** |
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1. **Currently enrolled in the Post Graduate Certificate in Higher Education Practice (PGCHEP)?**

**Yes**  **No**  **Exempt\***

**If no, planned date for commencing PGCHEP:**

**If no date planned for commencing PGCHEP, please provide explanation below:**

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**\*If exempt must be evidenced to Chair prior to submission of Final Probation Report or Staff Member Confirmed in Post e.g. a copy of the Application Form for Exemption from PGCHEP, approved by the Dean.**

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| **Modules**  **(please list all planned or undertaken – see** [**http://staffdev.ulster.ac.uk/index.php?/higher\_education\_practice/pgchep**](http://staffdev.ulster.ac.uk/index.php?/higher_education_practice/pgchep) **for details)** | **Date undertaken/ planned** | **Date awarded** |
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**SECTION 6 – OTHER COMMENTS BY HEAD OF SCHOOL/DEPARTMENT**

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**SECTION 7 – RECOMMENDATIONS OF HEAD OF SCHOOL/DEPARTMENT**

**First Report (if applicable)**

1. **Progress satisfactory**

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| **Comments:** |

1. **Progress not satisfactory or requiring remedial action**

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| --- |
| **Please provide details and agreed action plan:** |

**Second Report (if applicable)**

1. **Progress satisfactory**

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| **Comments:** |

1. **Progress not satisfactory or requiring remedial action**

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| **Please provide details and agreed action plan:** |

1. **Appointment to terminate at end of second year**

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| **Please provide reasons for recommendation to terminate:** |

**Final (or First and Final) Report (if applicable)**

1. **Confirm in Post**

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| **Comments:** |

1. **Terminate**

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| **Please provide reasons for recommendation to terminate:** |

1. **One year extension to Probation**

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| **Please provide reasons and agreed action plan:** |

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| **Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **(Head of School/Department)** | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **(Research Institute Director)** | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**SECTION 8 – COMMENTS AND FURTHER INFORMATION BY MEMBER OF STAFF**

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**DECLARATION: I have discussed the preparation of this report with my Head of School/Department, have read the report and attached a brief up-to-date Curriculum Vitae.**

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| **Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **(Member of Staff)** | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **(Dean/Director)** | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**CHECKLIST**

Prior to this Report being submitted to Human Resources the following details should always be completed/attached:

PGCHEP enrolment status  Signed by Research Institute Director (if applicable)

PGCHEP exemption confirmation (if applicable)  Signed by Staff Member

Recommendation provided  Signed by Dean/Director

Signed by Head of School/Department  CV attached

*This form should now be returned to Human Resources Department, Room 8M15, Jordanstown campus.*

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| **ACADEMIC PROBATION COMMITTEE**  **Report Approved:** Yes No  **Comments/Action required by Chair:**   |  | | --- | |  |   **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **(Chairperson of Academic Probation Committee)** |

**Office Use Only**

**Progress Satisfactory:** Y/N **Confirm in Post:** Y/N **ER Initials:** \_\_\_\_\_\_\_  **AltaHR**: \_\_\_\_\_\_\_ **Signed HRSA:** \_\_\_\_\_\_\_\_\_

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| --- | --- |
| **Office Use Only**  First\*  Second\*  Final\*  **Report sent to Academic Probation Committee Chair**  **Date Sent to Chair of Academic Probation Committee:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date Returned from Chair of Academic Probation Committee:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  | | --- | | **Action required (if appropriate):** |   **Progress Satisfactory:** Yes\*  No\*  N/A\*  **Confirm in Post:** Yes\*  No\*  N/A\*  **Employee Relations Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **HESA Teaching Qualification - Core HR updated:** Yes\*  No\*  N/A\*  **Core HR updated:** Yes\*  No\*  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **HRSA Initials:** \_\_\_\_\_\_\_\_\_\_  \*tick as appropriate |