# Offer of Appointment Form

**This form confirms the details needed to issue a formal offer of appointment.We need the Interview Assessment Summary form to notify other candidates of the outcome of their interview**

*New appointments will normally be made on the first incremental point of the advertised grade within the salary scale. You must speak to your HR Advisor before offering anything higher than the bottom of the grade.*

**Job title and department**:

**Name of appointee**:

**Has a verbal offer been made?**: **Y / N If yes, offer made by**:

## Contract details

**Contract Type**: Open / Fixed Term / Open with fixed term funding

**Start date**: **End date (if fixed-term)**: **Fixed term funding end date**:

**The start date should normally be a working day.**

**Right to work checks:** New employees must show their right to work in the UK documents before they start work.

**If the proposed start date is different from that in the Vacancy Request Form please confirm that the change is agreed with the Management Accountant**: **Y / N**

**Grade**: **Spine Point**: **Salary**:

**Allowances**: (eg Wellcome Trust) **Allowance Value**: £

**Allowance Name**:

**Contract hours**: Full-time / Part-time **Part-time FTE / hours of work**:

## Academic Probation

Grade 7 positions undertaking both research and teaching should undertake two years’ probation unless the criteria in the Probation Policy (para 2.3) are met and the Dean and Head of Department agree in consultation with HR that nine months’ probation is appropriate.

**Please specify**: Two years / Nine months

## PGCAP

Staff engaged in teaching and scholarship activities, appointed for a period of longer than two years should undertake the University PGCAP course, unless they already hold an equivalent qualification or have equivalent experience.

**Please confirm if required**: PGCAP required / No PGCAP

**If no, state reason**:

## First day contact details

**Remember that coming to HR to show work permission documents may be the first action**

**Place**: **Time**:

### Departmental contact

**Name**:

**Telephone**: **E-mail**:

### Line Manager (if different from above)

**Name**:

**Telephone**: **E-mail**:

**Your name**:

**Signature**:

**Department**:

**Date**:

## What to do next

* Email this form with the **Interview Assessment Summary** form to your HR Administrator.