|  |  |  |  |
| --- | --- | --- | --- |
| **Post** |  | **Name** |  |

**Section A**

|  |  |  |  |
| --- | --- | --- | --- |
| ***Pre populated*** | ***Employee Completes*** | ***Assessing Managers Complete*** | |
| **Person Specification Essential Criteria**  **N.B. If employee does not meet all of the essential criteria they cannot be considered any further for the post**  *(This section will be pre-populated with the criteria from the position for which you are being assessed)* | **Evidence**  ***(You will need to demonstrate that you meet the essential criteria or can be with reasonable training and support*** *You should indicate clearly if you are undertaking a qualification or any training identified in the essential criteria e.g. where it’s stated that either possessing or working towards a qualification is essential. You must clearly state where / how you are studying and at what stage you are)* | **Met**  *(Tick or state yes if the criteria is met or can be with reasonable training and support)* | **Not Met**  *(If criteria not met Manager will be required to confirm reason/s why)* |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

I confirm that the information I have given above is accurate, and I am able to evidence any stated qualifications if requested.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signed: |  | Print: |  | Date: |  |

**Section B**

This section must be countersigned by your current line manager, as verification of the evidence submitted below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employee Completes** | **Assessing Managers Complete** | | | |
| **Principal Accountabilities**  *(These will be pre-populated for you. Where there are similar themes, or a large number of accountabilities, they may be grouped)*  ***Note: If the job profile has more than eight principal accountabilities please group the main headings e.g. budgeting, supervision of staff, report writing etc.*** | **Evidence not recognised in current substantive Job Profile**  *(Ensure that any duties or experience you have had in the last year in respect of the particular accountability listed, and which you feel is not sufficiently evidenced in your current Job Profile is detailed here)* | **Weighting %**  *(The Assessing Managers will agree an appropriate weighting relative to the overall role, against each principle accountability / grouping)*  **Attach weighting to significant areas.** | **Job Profile %**  *(The accountabilities in your current substantive job profile will be scored against the accountabilities of the post you are being assessed against)* | **Evidence %**  *(The information you have provided in the ‘Evidence’ column will be scored against the accountabilities of the post you are being assessed against. Duties and responsibilities already scored from your job profile will not be scored again if the same or very similar information is repeated in the evidence section)* | **TOTAL %**  *(The total of both Job Profile and ‘Evidence’ scores)*  **Guidance needed on scoring.** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **TOTALS** | **100** |  |  | A minimum of 70% is required to confirm in post |

Employee

I confirm that the information I have given in ‘Section B’ is an accurate reflection of work I currently undertake, or have undertaken within the last year.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signed: |  | Print: |  | Date: |  |

Manager:

I confirm that the information given above is an accurate reflection of the work undertaken currently, or within the last year.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signed: |  | Print: |  | Date: |  |

Assessing Managers:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Comments: | | | | | | | | |
| Name: |  | | |  | Name: |  | | | |
| Position: |  | | |  | Position: |  | | | |
| Signed: |  | Date: |  |  | Signed: |  | Date: |  | |

HR Reviewer:

|  |
| --- |
| Comments: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signed: |  | Print: |  | Date: |  |