

Upper Pay Range Application Form

Teacher's Details:

Name _____

Post _____

Appraisal Details:

Years covered by planning/review statements:

Schools covered by planning/review statements:

Declaration:

I confirm that at the date of this request for assessment to cross the threshold I meet the eligibility criteria and I submit performance management/appraisal planning and review statements covering the relevant period.

Applicant's signature: _____

Date: _____

The signed proforma should be appended to the teacher's appraisal planning record statement.