

**Achievement, Contribution and Excellence**  (ACE) **Awards**

Application Form

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Section 1

**Applicant Details**

**Name:**

**P Number:**

**Faculty or Directorate:**

Please click here to select an option:

**Are you an Academic or Professional Services Staff Member?**

Please click here to select an option:

**Job Title:**

**Current Grade:**

Please click here to select an option:

**Current Spinal Point** (if known)**:**

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**Please indicate whether you are applying for:**

**A permanent increment –** an ACE or progression point is applied, depending on your current spinal point.

**A non- recurring award -**  a one off payment equivalent to an additional increment.

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Section 2

**Applicant ACE Statement**

Please select 3 of the criteria provided. 

For each criteria, please describe the outstanding contributions that you have made, evidencing activity and impact in no more than **500 words**.

Please refer to our application guidance prior to completing this section, which provides further information on the criteria.

**Criteria 1:**

Please click here to select an option:

**Applicant response:**

**Criteria 2:**

Please click here to select an option:

**Applicant response:**

**Criteria 3:**

Please click here to select an option:

**Applicant response:**

**Please send a copy of your application to your line manager to complete section 3 and to progress to your PVC/Director.**

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Section 3 – to be completed by line management

**Line Manager Supporting Statement**

**Line manager name:**

**Please confirm the following:**

The information provided in this application is accurate.

The applicant has successfully achieved PDR objectives.

That I would like to recommend the applicant for an ACE Award

**Please can you outline where you feel the applicant has delivered:**

* Outstanding performance
* Significant achievement beyond normal expectations
* A consistently exceptional contribution

To ensure that the panel are able to effectively consider ACE applications, please can you briefly provide evidence of outstanding performance **in a maximum of 750 words.**

If you do not support this application, please explain why.

**Line Manager response:**

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Section 4 – to be completed by PVCs/Directors

**PVC/Director name:**

**Please confirm the following:**

I support this application for an ACE Award.

If you do not support this application, please can you briefly explain why.

Please provide any further comments if required.

**PVC/Director Comments:**