

**APPEAL AGAINST RE-EVALUATION RESULT**

|  |  |
| --- | --- |
| Name: |  |
| Professional Services Division / Faculty / School: |  |
| Job Group No. |  |
| Job Title: |  |
| Date of email notifying outcome of re-evaluation: |  |
| Grounds of Appeal (delete those not relevant): | Flaw in ProcessIncorrect scoring/matchingDirect Comparator |
| Please provide a full explanation of your ground for appeal, bringing the panel’s attention to appropriate evidence within the Job Description, as appropriate: **Note – the job description must not be amended** |  |
| Role-holder’s Declaration: | *“I confirm I agree with the content of this appeal.”*  [ ]  (check box) |
|  | Name:  |
| Date: |  |
| Line Manager’s Declaration: | *“I confirm I agree with the content of this appeal.”*  [ ]  (check box) |
|  | Name:  |
| Line Manager’s Comments: |  |
| Date: |  |
| Professional Services Divisional Manager’s / Faculty Manager’s / School Manager’s Declaration: | *“I confirm I agree with the content of this appeal.”*  [ ]  (check box) |
|  | Name:  |
| Date: |  |
| **PLEASE FORWARD THIS FORM BY E-MAIL TO THE RELEVANT FACULTY/DIVISIONAL HR MANAGER** |
| **For HR Use Only** |
| **Date received:** |  |
| **Deadline for appeal receipt** (**a deadline of 4 weeks from the date of notification to the role-holder is applicable for the ‘non-trivial flaw’ and ‘incorrectly scored’ routes of appeal):** |  |
| **Is the Appeal ready to be forwarded to the Panel for consideration:** | [ ]  **YES** [ ]  **NO** |
| **Name of Role Expert to attend the panel (where deemed necessary by the HRM/O):** |  |
| **Where appropriate, any contextual information for the Technical Adviser:** |  |
| **HR Manager/Officer:** |  |
| **Date:** |  |
| **Please now forward to: reward-team@bristol.ac.uk** |