Recruitment Protocol

Application form for **Academic, Research and Teaching** posts

***How to use this form:***

Please do not complete this form for SAP cases (including the creation of RSIVs) – [follow the existing process](https://hr.web.ox.ac.uk/senior-appointments-panel)

[**SECTION 1**](#_SECTION_1:_please) should be completed for all request types.

[**SECTION 2**](#_SECTION_2:_COLLEGE)should be completed for Associate Professorships only.

[**SECTION 3**](#_SECTION_3:_ADDITIONAL)is optional for non-standard requests.

[**APPROVAL**](#_APPROVAL)should be completed for all request types.

All cases should be accompanied by a job description and org chart. Please send the completed form and supporting materials to [ssdrecruitmentprotocol@socsci.ox.ac.uk](mailto:ssdrecruitmentprotocol@socsci.ox.ac.uk?subject=Protocol%20request).

## SECTION 1: please complete for all request types

|  |  |
| --- | --- |
| **Request type** | **select from list.** |

|  |  |
| --- | --- |
| **Department** |  |
| **Cost centre** |  |
| **Post title** |  |
| **Grade** | **select from list.** |
| **Contract type** | **select from list.** |
| **Period if fixed term** |  |
| **Full or part time** | **select from list.** |
| **Fte/hours if part time** |  |

**BUSINESS CASE**

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| **Please provide a brief summary outlining why it is essential to recruit/refill this post.** |
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**COSTS & FUNDING**

|  |  |
| --- | --- |
| **Is this post budgeted for this Financial Year?** | SELECT FROM LIST. |
| **Annual cost, including on-costs**  *(see* [*Salaries website*](https://finance.admin.ox.ac.uk/salary-scales)*)* | £ per annum |
| **Forecast cost, including on-costs, in current financial year:** | £ |
| **How will the post be funded?** |  |
| **Are there savings being made, or will any additional income be generated, if this request is approved?** |  |
| **What is the overall net cost?** |  |

## SECTION 2: COLLEGE CONSULTATION (for associate professorships only)

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| **What consulation with the college has taken place?** |
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## SECTION 3: ADDITIONAL INFORMATION

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| **Please use this box to explain if the request does not fit into the criteria above.** |
|  |

## APPROVAL

|  |  |  |
| --- | --- | --- |
| **Department** | **Signed (name and role)** | **Date** |
|  |  |  |