**CAREER GRADE – PROGRESSION RECOMMENDATION**

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| **Employee Name** | |  | | | | | | |
| **Service Area** | |  | | | **Post No:** | 00000000 | **Post Title:** |  |
| **Recommendation for progression to Grade:** | | | |  | **SCP** |  | | |
| **Current Grade of Employee to progress from:** | | | |  | **SCP** |  | | |
| **Competency** |  | | **Performance (explain how each criteria is met)** | | | | **Evidence** | |
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| **Qualification/ Formal Course** |  | |  | | | |  | |
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| **Tasks/Skills** |  | |  | | | |  | |
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| I confirm that the above person meets the Career Grade criteria, and I recommend them for progression to the bottom of the next level in the Career Grade Scheme. I have attached a copy of the current Job Description and Career Grade Scheme for this post. | | | |
| **I request that the new grade takes effect from:** |  | | |
| **Line Manager**  **Print Name** |  | **Date** |  |
| **Line Manager**  **Signature** |  | | |
| **Assistant Director**  **Print Name** |  | **Date** |  |
| **Assistant Director**  **Signature** |  | | |

Please send your Career Grade Progression form to the **People Development Team** at [**peopledevelopment@tendringdc.gov.uk**](mailto:peopledevelopment@tendringdc.gov.uk)

**Career Grade Progression Approval**

I can confirm that I have read the above recommendation and agree that in line with the Councils Career Grade Policy that the above Career Grade progression meets the set criteria.

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| **People Development Manager**  **Print Name** |  | **Date** |  |
| **People Development Manager Signature** |  | | |