# UCL open logo

# HONORARY APPOINTMENTS NOMINATION FORM

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| All fields must be completed by the nominating member of staff; please put n/a wherenot applicable. | | | | |
| Name of nominator: | | | | |
| Name of Head of Department: | | | | |
| Department: | | | | |
| Faculty: | | | | |
| Nature of Request (please tick): | | | | |
| New Request(not currently at UCL) |  | Reappointment(already honorary at UCL)  *NB if appointment title is changing enter previous level on page 2* | |  |
| DETAILS OF NOMINEE: | | | | |
| Prof  | Dr  | Mr  | Mrs  | Ms  | Other | | | Surname: | |
| Forename(s): | | | Known as (if different): | |
| Email address: | | | | |
| Qualifications: | | | | |
| Current employer: | | | | |
| Title requested: | | | | |
| **Please outline:** | | | | |
| Details of the academic standing of the nominee: | | | | |
| The reason for award of honorary title: | | | | |
| The contribution the nominee will make to the academic life of UCL: | | | | |
| The value of this appointment to the School/Faculty/Department: | | | | |
| Is the nominee prepared to undertake UCL’s mandatory training and refresher training as part of their appointment? Yes / No | | | | |

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| Duration of Appointment: |  | |
| Proposed Start date: | Proposed End date (max. 3 years): |
| Has the nominee got a current appointment with UCL? (Please check the [**UCL directory**](https://www.ucl.ac.uk/directory/)).  If yes, should the assignment be terminated? | **Yes  / No** |
| Any other relevant information: | |
| Right to work:Will the nominee be undertaking the honorary work in the UK? **Yes  / No**  If yes, will they be able to evidence that they have the right to work in the UK?  (Honoraries based and working overseas will not need a right to work check) | |

## Division Approval

I can confirm that I approve the nomination

Electronic signature:

Name:

Job title: Division Head of Department

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| How to submit the application |

### Please attach their CV and forward to *email address* who will submit the application to the Honorary Professorial Committee or the Faculty Honorary Committee for consideration.

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| Record of Honorary Committee outcome: |

Date of Committee meeting:

Approved / Declined:

Name of Secretary to Committee:

Secretary email: