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| **Incremental Credit Application Form**  (Please ensure you read PHW Starting Salary Guidance prior to completing)  **The Appointing Officer / Manager should never confirm a starting salary above the minimum of the pay band.**  **No applicant should be advised of their salary pay point during the appointment process, only the salary range.**  New staff appointed from outside the NHS will normally commence on the minimum point of the pay band.  Incremental Credit is not applicable for candidates with continuous NHS service moving within the same organisation or between NHS organisations, on a permanent or temporary basis, to a promotional post or one of the same band.  Incremental credit should not be viewed as the norm and is only awarded in exceptional circumstances. | | | | | | | | | | | | | | | | | | | | | |
| **Employee Details** | | | | | | | | | | | | | | | | | | | | | |
| **Name** | |  | | | | | | | | | **Post** | | |  | | | | | | | |
| **Directorate** | |  | | | | **Division** | | |  | | | | | | | **Team** | |  | | | |
| **Application Details** | | | | | | | | | | | | | | | | | | | | | |
| **New Starter to the NHS with relevant experience** | | | | | | | |  | | | | | **Re-joining the NHS with relevant experience** | | | | | | |  | |
| ***If re-joining the NHS please only provide the below details in relation to the last NHS employer*** | | | | | | | | | | | | | | | | | | | | | |
| **Previous Employer** | | |  | | | | | **Title of post** | | | | |  | | | | | **Job description attached** | | |  |
| **Duration post held** | | | | |  | | | | | | | | **Date of Leaving** | | | | |  | | | |
| **Salary** | | |  | | **Pay Band** | |  | | | | | | **Increment Point** | | | |  | **Pay Slip attached** | | |  |
| **Incremental Request** | | | | | | | | | | | | | | | | | | | | | |
| **Pay Band** | | |  | | **Increment Point** | | |  | | | | | **Salary** | | |  | | | | | |
| **Evidence**  Please read PHW Starting Salary Guidance for full details of required evidence and refer to the Supporting Documents Checklist below. | | | | | | | | | | | | | | | | | | | | | |
| ***Evidence obtained from application form and job description and evaluated against new post’s job description and requirements.*** | | | | | | | | | | | | | | | | | | | | | |
| **Application form attached** | | | |  | **Details of any forms of evidence reviewed** | | | | |  | | | | | | | | | | | |
| **Relevant Employment History** | | | |  | **Brief Details** | | | | |  | | | | | | | | | | | |
| **Experience, Skills and Qualifications in same field of work as new post** | | | |  | **Experience, Skills and Qualifications at same of higher level as new post** | | | | |  | | | **Brief Details** | | |  | | | | | |
| **If Experience, Skills and Qualifications obtained in significant past, provide evidence of application and of maintaining skill level** | | | | | | | | | |  | | | | | | | | | | | |
| **Impact**  In the interest of equality, the Appointing Officer / Manager must consider the impact on existing employees with longer service in the same or comparable post within the department / team to avoid less qualified/experienced staff ‘leapfrogging’ current staff. Appointing Officer / Managers should review a ‘Staff in Post’ report to consider impact on existing employees. | | | | | | | | | | | | | | | | | | | | | |
| **List the salary and years of experience for existing employees in the same or comparable post within the department / team.** | | | | | | | |  | | | | | | | | | | | | | |
| **Details of the impact of awarding the increments on current employees within the department and comparable role.** | | | | | | | |  | | | | | | | | | | | | | |
| **Authorisation**  It is the Appointing Officer / Manager’s responsibility to ensure that the Incremental Credit Application and supporting evidence is submitted to People Support Team at PeopleSupport.PHW@wales.nhs.uk in a timely manner and in accordance with PHW Starting Salary Guidance and Appendix 2 of the Recruitment and Selection Policy.  Applications must be submitted within 3 months of appointment date. Applications received after this date will not be considered.  If any of the required supporting documents are missing, the application will be returned to the Appointing Officer / Manager. | | | | | | | | | | | | | | | | | | | | | |
| **Appointing Manager** | | | | | | | | | | | | | | | | | | | | | |
| **Name** | | |  | | | | | **Job Title** | | | | |  | | | | | | | | |
| **Support application** | | |  | | **Reasons for support** | | |  | | | | | | | | | | | | | |
| **Signed** | | |  | | | | | | | | | **Date** | | | | | | |  | | |
| **HR** | | | | | | | | | | | | | | | | | | | | | |
| **Name** |  | | | | | | | | | | | | **Job Title** | |  | | | | | | |
| **Authorise** | | | | | | | |  | | | | | **Do Not Authorise** | | | | | | | |  |
| **Sufficient Evidence** | | |  | | **No Evidence** | | |  | | | | | **Insufficient Evidence** | | |  | | **Other (Detail Below)** | | |  |
| **Any Comments** | | |  | | | | | | | | | | | | | | | | | | |
| **Signed** | | |  | | | | | | | | | | **Date** | | |  | | | | | |

**Supporting Documents Checklist**

|  |  |
| --- | --- |
| **Previous Job description and person specification submitted** |  |
| **Previous payslip (illustrating previous salary)** |  |
| **Application for submitted for post** |  |
| **Evidence of impact – a list of salary and years of experience for existing employees in the same or comparable post within the department / team.** |  |
| **Other supporting documents such as CV (please specify)** |  |