GMFRS Sponsorship for Promotion.

For Applicant- If you have been in you currently position (e.g. station) for less than 6 months then you will need to provide further sign off from your previous line manager. If your current line manager has been in post for less than 6 months then again a further counter sign off will be required from your previous line manager.

For Sponsor - in either of the cases above please add your comments and sign the form before sending it to the previous manager for further sign off. The form should then be returned to the applicant for submission.

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| **Line Manager Statement** |
| Please provide a brief statement on the potential you feel this individual displays that would give you confidence in their ability to fulfil the role they are applying for. Align your answers to the competencies for the role being applied to and provide examples or evidence to support your statement. |
| Please ensure the applicant meets the **full** application requirements before sponsoring. Applicants are able to download their application forms (via the print icon) on Greater.jobs for you to view before submitting.I support this individual in their application for the role of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sponsors Signature:DatePrint Name:Job Title: |

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| **Countersigning Manager Statement-** *This should be completed by your sponsors Line Manager.* |
| * Countersigning Managers are expected to challenge and seek justification of evidence provided by the 1st sponsor in support of the individual’s application for promotion.
* Please check the candidates live MCR’s ensuring they align to the requirements for the gateway and are robust in their reflection. The OA team will complete spot checks for quality assurance.
* Please provide a brief statement on the potential you feel this individual displays that would give you confidence in their ability to fulfil the role they are applying for:
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| Applicants are able to download their application forms (via the print icon) on Greater.jobs for you to view before submitting.I support this individual in their application of the role of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.Signature:DatePrint Name:Job Title: |