****

**NOMINATION FORM – EMERITUS PROFESSOR**

|  |
| --- |
| **Name and current academic title of proposed appointee:** |
|  |
| **School/College:** |
|  |
| **Date of retirement (or planned date):** |
|  |
| **Proposed Emeritus Professor Title:** |
|  |
| **Details of any other contractual appointments:** |
|  |
| **Academic Discipline/Specialist Area:** |
|  |
| **Name and current academic title of proposed appointee:** |
|  |
| **Head of College’s Supporting Statement** *This statement should describe how nominees are exceptional in their academic disciplines and have brought distinction to themselves and to the University in research and publications and/or teaching and learning or other forms of scholarship and/or have given outstanding service to the University. It should also set out the envisaged arrangements for active and continuous links with the University which will contribute to its reputation for teaching, research, scholarship, professional standing, public benefit and/or entrepreneurial activity. Emeritus appointments will not normally be contemplated for individuals who are taking up posts at other universities. If the nominee is taking up such a post, the Head of College must make the case for an exceptional waiver of this principle*.**PLEASE ATTACH A CURRENT CV TO THIS FORM** |
| (please expand the space below, if required) |
| **This nomination was approved by the College Management Team on (date):** |
|  |
| **Approved by PVC/Head of College:** |
| **Signature:**  | **Date:** |

Please return the completed form and CV to **PPC@lincoln.ac.uk**

|  |
| --- |
| **Nomination recommended by Committee of Personal Chairs and Readers**  |
| **PVC Signature:**  | **Date:** |
| **Appointment approved by the Vice Chancellor** |
| **Signature:**  | **Date:** |