

Appendix 2: Aspirational Interview – 4 part document

1. Background information

Please complete part 1 of this form and bring it with you when you attend for your interview.

If you have any questions or concerns prior to your interview please contact your Line Manager or the Human Resources Department.

Part 1

Personal Details - please complete the following information about you.

Surname:	First Name(s)
Contact Address:	Contact Numbers: Home: Work: Mobile: Email:

Employment Details – please complete the following information about your employment with the Trust.

1 Base (e.g. Victoria Hospital):	2 Department
3 Directorate	4 Division
5 Trust Start Date:	6 Length of NHS Service:
7 Post Title:	8 Agenda for Change Banding:
Is your post: Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>	Were you redeployed into this post ? Yes <input type="checkbox"/> No <input type="checkbox"/>
Is there any Existing Pay Protection in place for this post: Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes when is this due to come to an end?

Reason for redeployment :

Capability – Ill Health Grounds

Capability – Performance

Organisational Change

PART 2 – TO BE FILLED IN WITH LINE MANAGER

Please describe your current work pattern with approximate times.

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Week 1	Week 2 (if applicable)
Monday	Monday
Tuesday	Tuesday
Wednesday	Wednesday
Thursday	Thursday
Friday	Friday
Saturday	Saturday
Sunday	Sunday

Are you willing to change your current work pattern? Yes No
If yes please indicate below when you are available to work

	AM	PM	EVENING
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

COMMENTS	
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Part 3 Operational Summary

Employee Name **Area of Work / Base**

Manager completing Interview..... **Date of completion.....**

3.1	Key Skills	
3.2	Key Experience	
3.3	Previous employment experience	
3.4	What key transferable skills do you have?	
3.5	Do you need additional support with regard to disability needs?	

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3.6	Further comments needed to be taken into consideration:	
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Managers Signature

Employee Signature.....

Date.....

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Part 4 Summary of Identified Development Needs

Development Need	Action to be Taken	By Whom

Managers Signature

Employee Signature.....

Date.....

