THRESHOLD ASSESSMENT APPLICATION FORM

Name:	
TR Number:	
2024 and am eligible to apply for movemen	Pay Scale for teachers on or before 1 September nt to point 1 of the Upper Pay Scale with effect from 1 s of employment amounting to at least 26 weeks in
	ession will be based on my performance within the four my two most recent Performance Review and Staff
with other evidence as required, to make a	and 2024/25 academic years should be used, along a decision to progress to the Upper Pay Scale; if there 4/25 years then the most recent one (within the past 5
demonstrates how I have met the threshol	e from my teaching practice below that I believe d standards. (However, where evidence is available ation may be used to complete the relevant section in
Teacher signature:	Date:

I have provided a summary of the evidence from my teaching practice that demonstrates how I believe I have met the threshold standards.

TO BE RETURNED TO THE SCHOOL PRINCIPAL NO LATER THAN FRIDAY

3 OCTOBER 2025. APPLICATIONS RETURNED AFTER THIS DATE WILL NOT BE
CONSIDERED.

knowledge.	
3	
Principal's decision: *met / not met	
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2. Teaching and assessment of learning.	
Principal's decision: *met / not met	
3. Contribution to raising standards through pupil achievement.	
Principal's decision: *met / not met	
4. Effective professional development.	
T. Linective professional development.	
Principal's decision: *met / not met	

^{*}Delete as appropriate