****

**2nd Referee Form**

**Reference 2** *(to be completed by a middle or senior leader)*

SLEs are outstanding leaders, with at least two years’ experience and excellent knowledge in a particular field of expertise. They work to support individuals and teams in other schools by providing high-level coaching, mentoring and support, drawing on their knowledge and expertise in their specialist area.

All applicants must meet the essential criteria to be accepted as an SLE. Each application is rigorously assessed against the eligibility criteria in the ‘Who can apply’ document[.](https://www.gov.uk/specialist-leaders-of-education-a-guide-for-potential-applicants) We therefore ask referees to take this into account when making a decision to recommend an applicant for the role.

In accordance with the Data Protection Act, the applicant you are providing a reference for has the right to view this reference, should he or she contact the relevant teaching school in order to see it. Please do not include any information that you would not be happy to discuss with the applicant as part of a professional conversation.

**SLE Applicant Name :**

**SLE Applicant School:**

## Your details

|  |  |
| --- | --- |
| **Name** |  |
| **Confirmation of role** |  |
| **School name** |  |
| **Email address** |  |
| **How long have you known the applicant?** |  |

1. **Please provide a supporting statement in the box below on how you consider the applicant meets the following criteria:**

* + The applicant is an outstanding middle or senior leader with excellent knowledge in a particular field of expertise.
  + The applicant has a successfully supported middle or senior leaders in another school
  + The applicant has a commitment to outreach work
  + The applicant demonstrates understanding of what constitutes ‘outstanding’ in his or her field of expertise.
  + The applicant has an appreciation of how his or her specialism and skills can contribute to the wider school improvement agenda.
  + The applicant has an analytical approach to identifying needs and can prioritise accordingly.

|  |
| --- |
|  |

1. **Do you support this application?**

Yes No

1. **Please tick a box below to indicate which statement matches your support for the applicant:**

1. I recommend this person unreservedly to undertake the role of an SLE

1. I recommend this person for the role of SLE, but have some reservations

1. I am unable to recommend this person for the role of SLE

1. **Additional comments**

|  |
| --- |
|  |

Thank you for taking the time to complete this form. If you have indicated that you have reservations in recommending or feel unable to recommend this applicant, the relevant Teaching School may contact you to discuss the position.

**Please return this form to:**

**Name:** Tracy Goodway

**Email:** [cpdctsa@newlandsspring.essex.sch.uk](mailto:cpdctsa@newlandsspring.essex.sch.uk)

**This application will not be considered until this process has been completed.**

If you have any queries regarding this application, please refer to the guidance for further help and support or contact Tracy Goodway on 01245 442031 or email: [cpdctsa@newlandsspring.essex.sch.uk](mailto:cpdctsa@newlandsspring.essex.sch.uk)