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| Appendix 1: Internal Secondment Agreement |
| Personal Details of Secondee |
| Name |
| Job Title |
| Department |
| Division |
| Pay Band   | Contracted Hours |
| Nature of Secondment |
| Reason |
| Post to which applicant will be seconded |
| Department/Division |
| Period of Secondment | From : | To: |
| Funding arrangements |
| Please specify |
| Replacement Monies |
| Please specify |
| Agreement/Conditions of Secondment |
| * Applicant will return to substantive role after the secondment
* Applicant will return to equivalent post on no less favourable terms

And* The applicant has been informed where appropriate of the need to maintain their

professional registration and to keep up to date with their professional registration needs |

**Agreement (to be signed by all three parties)**

I confirm my agreement to the secondment in accordance with the conditions set out

above and for the period stated.

Employee’s signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree to release this employee to undertake the secondment for the agreed period stated

above.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

(Current Line Manager)

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree to accept this employee to undertake the secondment for the agreed period stated

above.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

(Host Manager responsible for the secondment post)

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_