



**Secondment release form**

*to be completed by the employee’s line manager*

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| Name of Applicant |  |
| Post Title: |  |
| Duration of secondment(Tick as appropriate) | 3 months | 6 months | 9 months |
|  | 12 months | 18 months  | Other: |
| Recruitment reference number |  |
| *I hereby agree for the above member of staff to be temporarily released for the above post, if successful at interview.* *If an extension to the agreed XX-month secondment period is required, the secondment line manager will contact us at least* ***one month prior*** *to the expiry date to discuss and agree any extension details.* |
| Substantive manager’s authorisation  | Signature:Print Name:  |
| Date of agreement |  |
| Secondment expiry date  |  |
| Date of plannedreturn to substantive post | (***use an approximation if exact date is unknown)*** |
| Secondment manager’s authorisation  | *I agree to comply with Ealing Council’s secondment terms and to notify the candidate’s substantive post manager* ***one month prior to expiry of contract and discuss and agree any extension details and notify HR.***Signature:Print Name: |

***PLEASE EMAIL THE COMPLETED FORM TO YOUR HR RECRUITMENT ADMINISTRATOR***