



Secondment Information

| | | | |
|---|------------------------------|-----------------------------|--|
| Employee Name | | | |
| Secondment Position | | | |
| Secondment Department | | | |
| Secondment Period | | | |
| Recruitment Reference (if applicable) | | | |
| Are you currently a continuing staff member? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Have you been in your current role for 12 months or more? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Have you completed probation? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Have you participated in the EDRS this year? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |

! If you have said no to any of the questions above you are not eligible for a secondment in accordance with the [Appointments Policy](#).

List your reasons for applying for the secondment position (i.e. professional development goals or mutual benefits).

| |
|--|
| |
|--|

I have read the Secondment Appointment Policy and Procedure.

! An approved Secondment Release Form must be submitted together with your application in PageUp, or by email to jobs@csu.edu.au.

| | |
|-----------------------------|---------------|
| _____ Employee Signature | _____ Date |
|-----------------------------|---------------|





Supervisor Endorsement

| | |
|-----------------|--|
| Name | |
| Position | |

Do you support the secondment for the above-mentioned applicant? Yes ☐ No ☐

Supervisor Comments

| |
|--|
| |
|--|

Supervisor Signature

Date

Approval (Band 7 or above) Who is this?

| | |
|-----------------|--|
| Name | |
| Position | |

Do you support the secondment for the above-mentioned applicant? Yes ☐ No ☐

Final Comments

| |
|--|
| |
|--|

Delegated Officer Signature

Date

