**DRAFT SECONDMENT LETTER**

*Agency head*

*Address*

Dear [insert]

**Home Agency:** [insert placement 1, employing agency]

**Host Agency:** [insert external placement agency]

**Secondee:** [insert graduate]

**{Program Year} NSW Government Graduate Program - Secondment**

I am writing to make arrangements to second the Secondee to the Host Agency to complete their {second} agency placement as part of the {Program Year} NSW Government Graduate Program.

Discussions have been held with Agency Coordinators regarding the upcoming rotations and graduates are aware of their next agency placement. I am therefore seeking your formal agreement to the secondment under section 64 of the *Government Sector Employment Act 2013* and the *Government Sector Employment Rules 2014* on the terms set out below.

The Secondee will be seconded as a graduate (Clerk Grade ¾ or equivalent) from the Home Agency to the Host Agency from {upcoming placement start date} to {upcoming placement end date} (the Secondment) and will continue to be employed by the Home Agency for that period. During the Secondment the Secondee will remain on the Home Agency payroll and there will be no exchange of invoices between agencies.

The Secondee will continue to accrue leave entitlements during the Secondment, and during the Secondment is entitled to use leave entitlements accrued prior to or during the course of the Secondment, subject to the approval of their manager at the Host Agency.

The Secondee’s manager at the Host Agency will be responsible for the management of the Secondee during the Secondment. The Secondee must comply with the policies and procedures of the Home and Host Agencies, and if there is any inconsistency the policies of the Host Agency will prevail.

Please note that either the Home Agency or the Host Agency may decide that the Secondment will finish before {upcoming placement end date}. If either the Home Agency or Host Agency seeks to end the Secondment early, they must provide reasonable notice to the other party to this agreement.

It would be appreciated if you could indicate your agreement to the Secondment on the terms set out above by signing a copy of this letter and returning it to the Home Agency as soon as possible.

Should you require further information regarding this matter please contact {name} on {telephone number} or {email address}.

Yours sincerely

Head of agency

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| **Signed by [head of Host Agency or delegate]**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Authorised Signatory  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Full Name of Authorised Signatory |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Witness  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Full Name of Witness |

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| **Signed by [head of Home Agency or delegate]**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Authorised Signatory  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Full Name of Authorised Signatory |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Witness  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Full Name of Witness |