

NOTICE OF INTENTION TO TAKE PARENTAL LEAVE FORM

Please complete this form and discuss with your Manager.

Your Details

Job title

Employee name

College/Department

This form should be submitted to your Manager at least 21 days before the date in which you would like the leave to start (or if leave is being requested to commence straight after the birth or adoption of your child, 21 days' notice should be provided before your expected week of childbirth or placement).

Manager's name			
Date(s) of Parental Leave			
I would like to request Parental L	eave	on the following date(s)	:
Start Date	End	d Date	Approved by Manager (Yes/No)

Employee Declaration (Please tick all that apply)				
	I am named on the child's birth certificate; or			
	I am named on the child's adoption certificate; or			
	I am living with the child's primary parent as their cohabiting partner and I am not an immediate relative; or			
	I have or expect to have parental responsibility for the child (this does not include a foster parent unless they have secured parental responsibility through the courts); and			
	□ I have responsibility for the child's upbringing.			
	☐ I confirm that the child for whom I am requesting to use Parental Leave for is within the age range for which Parental Leave can be taken.			
Employee's Signature:		Date:		
Manaç	ger's Signature:	Date:		

Once this form has been completed, and leave request approved by the Manager, the Manager should provide a copy of the form and the employee outcome letter to their HR Business Partner (or HR Administrator).

If the Manager is unable to approve the employee's request, they should speak to their HR Business Partner for guidance. Please note that if the employee's leave request is to be postponed, a letter must be written to the employee within 7 days of receiving this form, explaining the reason(s) for the postponement.