

APPLICATION FOR SHARED PARENTAL LEAVE

NOTICE OF ENTITLEMENT & INTENTION TO TAKE SHARED PARENTAL LEAVE

This form should be completed at least 8 weeks prior to the start date of leave being taken.

Section A - Employee details

Full name

National insurance number

Post title

Department

I wish to provide the Council with an initial indication of my proposed shared parental leave, as well as the required declarations from myself and my partner

Section B - Information to be provided by employee (mother)

My partners name is

My maternity leave and pay started/is expected to start on

My maternity leave and pay ended/expected to end on

My child's expected week of birth is

The total weeks of shared parental leave my partner and I have available is

I intend to take the following number of weeks shared parental leave (include dates)

My partner intends to take the following number of weeks shared parental leave (include dates)

Is this a new application or variation of Notice of Entitlement and Intention

New application

Variation

Section C - Declaration to be completed by the employee

I satisfy the following eligibility requirements to take shared parental leave:

- I have 26 weeks continuous employment ending with the 15th week before the expected week of childbirth and, by the week before any period of shared parental leave that I take, I will have remained in continuous employment with the Council
- At the date of the child's birth, I have the main responsibility, apart from my partner, for the care of the child
- I am entitled to statutory maternity leave in respect of the child
- I have complied with the Council's maternity leave curtailment requirements or returned to work before the end of my statutory maternity leave period, and will comply with the Council's shared parental leave notice and evidence requirements.
- The information I have provided is accurate
- I will immediately inform the Council if I cease to satisfy the eligibility criteria

Signed

Date

Section D - Declaration to be completed by the employee's partner

Full name

Address

National insurance number

- I have been employed or been self-employed earner in at least 26 of the 66 weeks immediately preceding the expected week of childbirth
- I have average weekly earnings of at least £30 for any 13 of those 66 weeks
- At the date of the child's birth, I have the main responsibility, apart from the mother, for the care of the child
- I am the father of the child, or am married to, the civil partner, or the partner of, the mother
- I consent to the amount of shared parental leave that the mother intends to take
- I consent to your organisation processing the information provided in this form.

Signed

Date

Section E – to be completed by Line Manager

Name

Job Title

Date

Once completed, please forward this form to Employee Services:
employeeservices@eastdunbarton.gov.uk

Notes

The start date of the first period of shared parental leave that you wish to take must be at least eight weeks after you have provided this notice. Shared parental leave must be taken in blocks of at least one week.

This notice is to allow the Council to check that you are entitled to shared parental leave and to provide the Council with an initial indication of the shared parental leave pattern that you wish to take. This notice is not binding and you must give the Council a period of leave notice at least eight weeks before the first period of shared parental leave in that notice that you wish to take. Any periods of shared parental leave that you indicate in this notice can be changed at a later date.