*This form must be completed by the employee and approved by Manager* ***no later than 8 weeks*** *before the proposed commencement of your Parental Leave. Failure to submit the form on time may mean the leave is not granted for the particular period.*

|  |
| --- |
| **NAME OF EMPLOYEE:** |
| **GRADE:** |
| **SCHOOL/UNIT:** |
| **STAFF I.D NUMBER:** |
| **PPS NUMBER:**  |
| **NAME OF CHILD:** |
| **DATE OF BIRTH OF CHILD:** **(Please attach copy of the** **child’s birth certificate)** |
| **PLEASE PROVIDE DETAILS OF THE MANNER IN WHICH YOU PROPOSE TO TAKE PARENTAL LEAVE** |
| **PROPOSED COMMENCEMENT** **DATE:** |
| **PROPOSED DURATION:** **(NO. of Weeks/Days)** |
| **MANNER IN WHICH TO BE TAKEN:** **(Block of X weeks/1 full day per** **week including day of week):** |
| **PROPOSED RETURN TO WORK DATE\*:** |
| **HAVE YOU AVAILED OF PARENTAL LEAVE PREVIOUSLY:**  [ ]  **Yes** [ ]  **No****If yes please name child?**  |

*\*Please note once agreed this arrangement cannot be amended however the return to work date is subject to change due to bank holidays etc that may fall during your Parental Leave arrangement.*

**CONFIRMATION**

***I declare that the information given is accurate and complete.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of Employee:** |  | **Date :** |  |

**APPROVAL BY HEAD OF SCHOOL/UNIT** *Prior to approval please discuss the employee’s request for leave with the HR Business Partner. Discussions will include how the unit will cover this period of leave, taking into account that temporary additional resources may not be possible.*

*I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* *(block capitals) approve that the above named employee has been granted permission by me to commence Parental Leave for the time stated.*

Approved/discussed with HR Business Partner?[ ]  **Yes** [ ]  **No**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:**  |  | **Date:** |  |

**APPROVAL BY HR OPERATIONS MANAGER**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of HR Operations Manager:** |  | **Date:** |  |