

## **Notice of Entitlement and Intention to take Shared Parental Leave Form**

Please ensure you have read the Shared Parental Leave Policy before completing this form.

This form should be used to declare your entitlement to and intention to take Shared Parental Leave. This form captures the details required to confirm your eligibility for Shared Parental Leave and Shared Parental Pay

**Maternity/adoption leave and statutory maternity/adoption pay/maternity allowance details**

the number of weeks taken according to the above dates)	
Number of weeks of shared parental leave / pay <b>you</b> intend to take	
Number of weeks of shared parental leave / pay the <b>other parent</b> intends to take	

**Shared parental leave and pay dates (leave must be taken in complete weeks)**

Please detail the start and end dates of the

shared parental leave / p-6(t)48m.04 - 0.00.6( pay)8.9( )]TJ /TT1 1 Tf -0.023 Tc 0.023 T6 [(yo)-20.7(u)]T

My partner is entitled to statutory adoption leave because of the placement of a child with us/him/her\* for adoption\*.

I had at least 26 weeks' continuous employment at the end of the 15th week before the expected week of childbirth (EWC)/the end of the week in which we were notified that we had been matched with a child and have remained continuously employed since then.

My normal weekly earnings in the eight-week period ending with the 15th week before the EWC were not less than the lower earnings limit (delete if not applicable)

I expect to share the main responsibility for the care of the child with the person who has completed the declaration below.

I intend to care for the child during each week that I am on Shared Parental Leave and receiving ShPP.

I have informed my line manager of the dates as indicated above.

I will immediately notify HR if either I cease or my partner ceases to meet the conditions of entitlement to SPL or ShPP.

The information I have provided is accurate.

Signed:

Date:

**Declaration by person taking Shared Parental Leave with the Employee**

Name

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