**Employee form to request parental leave**

Parental leave request form

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| **Details of employee** |
| Employee name: |
| Department: |
| Start date: |
| **Details of employee’s child** |
| Name of child: |
| Date of Birth: |
| Age at time leave will be taken: |
| If child is not yet born, expected week of birth: |
| Is your child in receipt of Disability Living Allowance? Yes/No |
| **Details of leave** |
| Intended start date of leave: |
| Intended end date of leave: |
| Intended length of leave: |
| How much parental leave have you taken before in relation to this child? |
| I have attached all relevant documentation eg copy of birth certificate/evidence of Disability Living Allowance (where appropriate) Yes/No |

**Employee Declaration**

I confirm that I am taking parental leave in order to care for my child. I understand, and agree, that:

* I must have at least one year’s continuous service at the date that parental leave is to begin
* I must give 21 days’ notice of my request to take parental leave
* parental leave is taken in blocks of one week except where the child is in receipt of Disability Living Allowance, in which case it can be taken in blocks of one day
* except in the case of a disabled child, where a day’s parental leave is requested, a full week will be deducted from my entitlement
* the company may postpone a period of parental leave requested for up to 6 months except where the request falls during the expected week of birth/placement for adoption or immediately following the birth or adoption
* the Company may contact my former employer to ascertain the length of parental leave previously taken (if any)
* parental leave is unpaid.

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| Employee signature: |
| Date: |

*For completion by manager*

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| **Date request received:** |  |
| **Request accepted?** |  |
| **Request postponed?** |  |
| **Date employee informed (letter attached):** |  |
| **If postponed, new start date of leave is:** |  |
| **Amount of parental leave remaining in relation to this child:** |  |