

## **Notification to Take Parental Leave**

This form is to record requests for parental leave and is to be completed by the employe and countersigned by a Manager. It must be completed for all requests for parental leave.

Name of Employee:

Start date of proposed parental leave: (If leave is proposed to be taken immediately after birth or adoption, please provide the expected week of childbirth or the expected week of placement and state that this is the case).	
End date of proposed parental leave:	
Total number of working weeks of proposed parental leave:	
Name of the child and the child's date of birth or the date the child was first placed with you for adoption (if known at this stage):	
Please provide details of parental leave already taken in relation to this child (including relevant dates), whether in this employment or in the employment of a previous employer:	
Please give any further information you would like your Manager to take into account in relation to this request:	
	apers or other relevant documentation showing parental ached in support of this request. If these documents are as they are available.
Relevant supporting documents attached?:	YES / NO
approved until my Manager has countersigned thi	nderstand that my request for parental leave is not as form. I accept that if I behave dishonestly in claiming are the Company as a gross misconduct offence and could
Signed by Employee:	Date:
Signed by Manager:	Date: