**This form (Form 3) is for QMUL employees requesting a period of Shared Parental Leave.**

You can print and fill out this form manually or you can complete and submit it electronically.

It must be submitted **at the same time as**, or after, your **‘Notice of Entitlement and Intention to take Shared Parental Leave’** (Form 2) is submitted, **and at least eight weeks before** the start date of the first period of Shared Parental Leave contained in this notice.

Your period of Shared Parental Leave:

* must take place within the first year of the child’s life
* must take place after the first two weeks of compulsory maternity or adoption leave
* must last at least one week
* must be taken in blocks of complete weeks
* may start on any day of the week.

You are entitled to submit up to a total of **three** notices (including variations) of a period of Shared Parental Leave. Your period(s) of leave may be **continuous** or **discontinuous.**

**Continuous Periods of Leave**

A continuous period of leave is an unbroken period of time between two dates contained within a single notice. For example, a period of six weeks.

If you notify your line manager of a continuous period of Shared Parental Leave, they must accept this.

**Discontinuous Periods of Leave**

Discontinuous periods of leave are two or more periods of time **contained within a single notice.** For example, a period of Shared Parental Leave of four weeks, followed by a return to work of two weeks, followed by a further period of Shared Parental Leave of four weeks.

If you notify your line manager of a discontinuous period of Shared Parental Leave, they **do not** have to accept this. You may choose to withdraw the notice (which will not count as one of your three notices), modify the dates or take the leave as a single continuous period.

**Varying your Period of Leave**

Should you wish to change your period of Shared Parental Leave, you must complete the form entitled ‘Variation to a period of Shared Parental Leave’ (Form 4) and give eight weeks’ notice. This change will count as one of your three notices.You and your partner should therefore plan your leave carefully.

**Please complete the details below:**

| QMUL Employee Personal Details | |
| --- | --- |
| QMUL employee number  (found on your payslip or MyHR) |  |
| Title |  |
| First Name |  |
| Surname |  |
| Contact email / phone number |  |
| School / Department / Institute |  |
| Line manager |  |

| Maternity Leave Details (applicable to the mother or primary adopter, whether they are the QMUL employee or not) | |
| --- | --- |
| Start date of Maternity Leave / Adoption Leave |  |
| End date of Maternity Leave / Adoption Leave\* |  |
| Expected Week of Childbirth or date of birth / date of adoption |  |

**\*The date when maternity/adoption leave has/was curtailed**

**Further to my ‘Notice of entitlement & intention to take Shared Parental Leave’ Form 2),I confirm I will take the following period(s) of Shared Parental Leave:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Start date** | **End date** | **Intended return to work date** | **Number of**  **weeks** | **Running**  **total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**My (non QMUL) partner will take the following period(s) of Shared Parental Leave (if applicable):**

|  |  |  |  |
| --- | --- | --- | --- |
| **Start date** | **End date** | **Number of weeks** | **Running total** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

| Please provide any additional details in relation to your Shared Parental Leave, for example, any information your line manager may find useful to consider a request for discontinuous leave. |
| --- |
|  |

| QMUL Employee Declaration | |
| --- | --- |
| I confirm that my partner and I continue to be entitled to take Shared Parental Leave, as previously declared.  I submit with this form (or have previously submitted) a **‘Notice of Entitlement and Intention to take Shared Parental Leave’** (Form 2).  **Please tick as applicable:**  This is my **1st  2nd  3rd** notice of a period(s) of Shared Parental Leave (including any variations previously submitted) | |
| **Employee’s signature** |  |
| **Date** |  |

**The QMUL employee should send this form to their line manager to complete the declaration below.**

| QMUL Line Manager Declaration | |
| --- | --- |
| **Please tick as appropriate:**  I **approve** this request for the period(s) of Shared Parental Leave outlined above  I **do not approve** this request for the **discontinuous** periods of Shared Parental Leave outlined above **and** I have informed the employee of my decision in writing.  *Please note that if you do not respond to a request for discontinuous Shared Parental Leave within 14 calendar days or if no agreement is reached whereby the employee modifies or withdraws the request, they are entitled to take the time off as one continuous period of Shared Parental Leave. The employee may choose a start date no sooner than eight weeks from the original notification.* | |
| **Line manager’s name** *(please print)* |  |
| **Line manager’s signature** |  |
| **Date** |  |

**Please send this form to your HR Administrator.**