**PARENTAL LEAVE REQUEST FORM**

**All relevant sections of this form are to be completed by the employee.**

**PLEASE USE BLOCK CAPITALS IN ALL SECTIONS**

**\*\*The following fields are mandatory and are to be completed in all cases**

**EMPLOYEE DETAILS\*\***

|  |  |  |  |
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| **NAME:**  |  | **POST TITLE:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **ASSIGNMENT NUMBER:****(Previously referred to as pay number)** |  | **DATE EMPLOYMENT COMMENCED (check completed one year’s service):** |  |

|  |  |
| --- | --- |
| **AMOUNT OF PARENTAL LEAVE TAKEN PREVIOUSLY IN RESPECT OF RELEVANT CHILD (to also include previous employment as 18 weeks is the maximum permitted):** |  |

**APPLICATION DETAILS\*\* (please delete/select the following information as appropriate)**

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| **I WOULD LIKE TO APPLY FOR \_\_\_ WEEK(S) / DAY(S) / HALF DAYS(S)** *(DELETE AS APPROPRIATE)* **UNPAID PARENTAL LEAVE FROM\_\_\_\_\_\_\_\_\_TO \_\_\_\_\_\_\_\_OR ­­­­­­­\_\_\_\_\_\_HOURS SO CAN WORK FLEXIBLY****THE LEAVE REQUESTED RELATES TO MY CHILD** *(INSERT NAME HERE IF APPLICABLE)* **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****WHO IS DUE ON \_\_\_\_\_\_\_\_\_\_ / WAS BORN ON\_\_\_\_\_\_\_\_\_\_\_\_ / WAS ADOPTED ON\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****WHO I BECAME LEGAL GUARDIAN FOR ON \_\_\_\_\_\_\_\_\_\_\_\_\_\_****THE CHILD I AM REFERRING TO IS UNDER 18 YEARS OLD Y / N** *(DELETE AS APPROPRIATE)* **I ATTACH ATTATCH A COPY OF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** *(INSERT CHILDS NAME)* **BIRTH CERTIFICATE / ADOPTION CERTIFICATE** *(DELETE AS APPROPRIATE)*  |

**I recognise that Nottingham City Council is allowed to make enquires of all or any employers in relation to previous periods of parental leave taken.**

**I also recognise that Nottingham City Council may postpone the period of leave requested by up to six months where the leave requested does not coincide with the expected week of my child’s birth or adoption and the business would otherwise be unduly disrupted by my absence.**

**I confirm that my purpose in requesting leave is for caring for my child.**

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| The information contained in/on this document/form is confidential and may also be privilege. It is for exclusive use of the addressee/s. This information is used solely to enable Nottingham City Council to perform its obligations under contracts of employment. If you are not the addressee, please note that any distribution, copying, or use of this message and information is prohibited. If you receive this information in error, please advise the sender immediately and delete/destroy it immediately.Version: April 2017 | **Please complete and return to:****Employee Service Centre****East Midlands Shared Service****escservicedesk@emss.org.uk** |

**I understand that any false information that I give on this form may result in disciplinary action being taken against me.**

|  |  |
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| **Employee Signature:** | **Date:** |

|  |  |
| --- | --- |
| **Approving Manager:** | **Date:** |
| **Approving Manager Signature:** |