



## Paternity Leave – Request Form

Please read the Paternity Leave and Pay Policy and Guidance for Staff to help you complete this form, available from xxx. If you require any advice, please do not hesitate to contact xxx.

Title	
First Name	
Surname	
Job Title	
School:	
Home Address	
Tel Number (Work)	
Tel Number (Home)	

I wish to inform you that I intend to take Ordinary Paternity Leave as follows:	
Expected date paternity leave period to commence*	_____
Expected return to work date**	_____
Partner's Expected Week of Childbirth (EWC) or expected date of placement for adoption	_____
*Your paternity leave cannot begin prior to the baby's birth/date of placement for adoption, but you can state that you wish your paternity leave to start on the day your child is born	
**Ordinary paternity leave must be taken in blocks of either one or two weeks	
Paternity Pay: please select from the options below	
Option 1: Week 1 - full pay, Week 2 – SPP only	<input type="checkbox"/>
Option 2: Week 1 – half pay and 1 week SPP, Week 2 – half pay 1 week SPP	<input type="checkbox"/>

***I declare that I:***

- am the baby's biological father / married to the mother / living with the mother in an enduring family relationship, but am not an immediate relative (*please delete as applicable*)
- will have responsibility for the child's upbringing
- will take time off work to support the mother or care for the child.

have provided a copy of my partner's MAT B1/matching certificate with this form

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please ensure you have discussed this application with your Line Manager and provided them with a copy of this form.