

## **MATERNITY LEAVE AND BENEFIT POLICY**

Release / Revision Date: August 31<sup>st</sup>, 2017

### **1- Objective:**

All woman employees will be entitled to maternity benefits as per the provisions of the Maternity Benefit

Act, 1961 The Maternity Leave and Benefit policy intends to:

- a) Regulate the employment of women in the organization for certain period before and after child- birth
- b) Provide maternity benefit
- c) Ensure that the organization meets all obligations as mandated by the statutes of The state.

### **2) - Leave Benefits:**

#### **2a) - Eligibility**

All female employees who have worked with the Company for a period of more than 80 days are entitled for maternity leave.

- The **maximum period** for which any employee is entitled to maternity benefit shall be **twenty six weeks** (182 calendar days) of which not more than 8 weeks shall precede the date of expected delivery.
- Eligibility of benefit is restricted up to two children only.

#### **2b) - Regulations**

- The applicant should inform about her pregnancy to the HR department minimum 2 months in advance before proceeding on leave.
- The application should be supported by a medical certificate confirming the pregnancy and expected date of child birth.
- If you are proceeding on leave beyond the stipulated time, you need to get special approval.
- Maternity leave may be combined with accrued Earned leave with **prior approval from the reporting manager/Director/HR**
- The applicant can avail eight weeks leave before the date of delivery and Eighteen weeks leave post-delivery. **The maximum leave benefit under normal circumstances will be 26 weeks only**
- Un-availed Maternity Leave is **non-encashable and will lapse**.
- The weekly offs and holidays falling during this period will be part of the leaves availed.

### **2c) - Leave for Illness arising out of Pregnancy**

- If an employee suffers a miscarriage she will be entitled to 6 weeks (42-calendar days) leave immediately following the day of her miscarriage.
- In case of illness arising out of pregnancy, delivery, premature birth of child, or miscarriage, a woman shall, on production of such proof as may be prescribed, be entitled to leave for a period of
- 1 month in addition to the benefit of 12 weeks or 6 weeks, as the case may be.
- The employee shall produce a valid medical certificate from a registered medical practitioner along with her leave application and forward it to the HR department minimum 2 weeks in advance. However any waiver in this regard is at the discretion of the Director.
- The leave benefit under this clause is permissible only for the purpose it is intended for.

### **2d) - Pay Benefit**

- The employee will be paid salary for the period stipulated in clauses 2b) (*Regulations*) and 2c) (*Illness arising out of Pregnancy*) above.
- The pay benefit for “Earned Leaves”, if availed in continuation with Maternity Leave shall be as per the “Leave Policy” in force.

### **3) - Procedures & General Rules:**

- The leave application for availing “Earned Leave” accrued by the employee shall be produced minimum 2 weeks in advance.
- In normal circumstances, the employee should resume her duties post maternity benefit stipulated above; failing which the leave period will be treated as unauthorized leave. Consequently, disciplinary action may be initiated for these days. However any waiver in this regard is at the discretion of the Director.

### **NOTE:**

- I. The onus of timely submission of approved leave application forms to the HR department lies completely on the person and while processing the payroll no prior intimation will be sent to the defaulting individuals. Information regarding number of paid days will be mentioned in the pay slip of the month.
- II. Any exceptions would have to be approved by the Director.
- III. **The “Maternity Leave Application Form” is appended below.**

## **MATERNITY LEAVE APPLICATION FORM**

To,  
The Director, MSC  
India, Lucknow.

Dated:.....

Sub.: **Application for Maternity Leave.**

Dear Sir,

I (**your name**) request you to please grant me maternity leave for the number of days mentioned below:

<u><b>PERSONAL DETAILS</b></u>			
First Name:		Middle Name:	Last Name:
Maternity Leave Type	Start Date	Return Date	Remarks(if any)
<sup>1</sup> Leave prior to child birth (max. 8			
Leaves post child birth			
Earned Leave combined with Maternity Leave (subject to accrued leave balance)			
<sup>2</sup> Leave for illness arising out of pregnancy ( max 1 month)			
<b>* Please provide medical certificate for (1) &amp; (2) above.</b>			

Thanking you in anticipation,  
**Applicant Signature:**

Best regards,  
{Your Name} Designation

Verified by HR (checked the medical certificate) and forwarded to Director/Reporting authority for approval

Name : \_\_\_\_\_ Designation: Signature: \_\_\_\_\_  
Date : \_\_\_\_\_

Approved/Rejected by Director/Reporting authority

Name \_\_\_\_\_  
Signature \_\_\_\_\_ Date: \_\_\_\_\_