

SPL forms (resulting from Maternity)

These are the forms needed by a mother and the person she will share Shared Parental Leave (SPL) with – known as the partner - to confirm eligibility and entitlement with their employers. The forms can also be used to confirm eligibility and entitlement to Shared Parental Pay (ShPP).

What forms need to be completed?				
	Both parents want to	Just the mother wants	Just the partner	
	take SPL	to take SPL	wants to take SPL	
Form 1	YES	YES	YES	
Form 2	YES	YES	NO	
Form 3	NO	NO	YES	
Form 4	YES	NO	YES	

- To learn more about SPL and ShPP go to www.acas.org.uk/spl
- Parents should use the calculator at www.gov.uk/pay-leave-for-parents to find some of the information needed to complete these forms
- Parents and employers should keep a copy of any completed forms
- Some employers may provide their own standard forms for employees to use
- If the mother is in receipt of Maternity Allowance (MA), she will need to notify Jobcentre Plus to curtail this entitlement
- The earnings requirements mentioned are correct as of March 2015

Key abbreviations used in these forms:

SPL Shared Parental Leave

ShPP Statutory Shared Parental Pay

SMP Statutory Maternity Pay

MA Maternity Allowance

Form 2: Notification that Mother is intending to take SPL (for Mother's Employer)

SECTION A: General (must be completed)	
Please accept this as notification that I (the mother) am	entitled to and intend to
take SPL (and ShPP if section C is completed).	
Mother's Surname	
Mother's First name(s)	
Partner's surname	
Partner's first name(s)	
Partner's Address	
Partner's National Insurance number (State 'none' if no number is held)	
Child's expected date of birth	
Actual date of child's birth (if child not yet born I will	
provide this information as soon as reasonably	
practicable following birth and before I take any SPL)	
SECTION B: Maternity entitlement details (all answ	wers that apply must
be completed)	I
Date mother started (or intends to start) statutory	
maternity leave	
Date mother's statutory maternity leave ended (or will	
end) Total number of weeks of statutory maternity leave	
that will have been taken at the date that statutory	
maternity leave ends	
Date mother started (or intends to start) SMP or MA	
Date mother's SMP or MA ended (or will end)	
Total number of weeks SMP or MA has been paid or	
will have been paid at date of curtailment	
Total number of weeks by which SMP or MA will be	
reduced (i.e. 39 weeks minus total number of weeks	
SMP or MA has been paid or will have been paid at	
date of curtailment)	
SECTION C: Amount of SPL available (must be con	npleted)
Total number of weeks of SPL created (52 weeks less	
total number of maternity weeks taken and any SPL	
from a previous notice and revocation)	
Total number of weeks of SPL I (the mother) intend to	
take	
Total number of weeks of SPL my partner intends to	

take
SECTION D: Indication of Mother's leave intentions (must be completed but is not binding)
I (the mother) currently expect to take SPL as follows:
Note: It will usually be helpful to answer this in a "From To" format
SECTION E: Amount of ShPP available (only complete if claiming ShPP)
Total number of weeks of ShPP created (39 weeks less total number of SMP taken and any ShPP paid from a previous notice and revocation) Total number of weeks of ShPP I (the mother) intend
to take:
Total number of weeks of ShPP my partner intends to take: I (the mother) currently expect to take ShPP as follows:

Note: It will usually be helpful to answer this in a "From... To..." format

SECTION F: Mother's declaration (must be completed)

The following points apply in all circumstances where a mother is entitled to maternity leave:

- I am giving notice that I am entitled to and intend to take SPL
- I have, or will have, been continuously employed for 26 weeks at the end of the 15th week before the week in which the child is due
- I will remain employed with this employer until any period of SPL that I intend to take
- I had (or will have) the main responsibility for the care of the child at the time of the child's birth (along with my partner who has made the declaration below)
- I am entitled to maternity leave, my maternity leave period is reduced and the remaining weeks are now available as SPL
- I will inform my employer immediately if I am no longer caring for my child
- I will give my employer a copy of my child's birth certificate or a declaration of the date and place of the birth where no certificate is available if my employer asks for this within 14 days of the date of this notice
- I will give my employer the name and address of my partner's employer or a declaration that they do not have an employer if my employer asks for this within 14 days of the date of this notice
- I (or my partner) have given a period of SPL notice
- The information provided in this declaration is accurate and meets the notification requirements for SPL

The following points only apply if Section E has been completed:

- I am giving notice that I am entitled to and intend to take ShPP
- I have been (or will be) paid at least the Lower Earnings Limit in the 8 weeks leading up to the end of the 15th week before the expected week of childbirth

- I am entitled to SMP in respect of the birth of our child, my maternity pay period is reduced and the period that remains is available as ShPP
- I will be absent from work in each week in which I will be paid ShPP and I will be on SPL in those weeks (if entitled to SPL)
- I intend to care for my child in the weeks I receive ShPP
- I will remain employed with this employer until before the date of my first period of ShPP
- I will immediately inform the person who will be paying ShPP if I revoke the curtailment of my SMP or MA

	•	The	information	provided in	this	declaration	is accurat
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Signature of mother	
Date mother signed	

SECTION G: Partner's declaration (must be completed)

- I am the father of the child, or at the date of the birth I was/will be the mother's spouse, the mother's civil partner and/or the mother's partner living with her and the child in an enduring relationship
- I had (or will have) the main responsibility for the care of our child at the time of the birth (along with the child's mother)
- I have been (or will have been) employed or self-employed in England,
 Scotland or Wales in 26 weeks of the 66 weeks before the expected week of birth
- I have (or will have) earned in total at least £390 in 13 weeks of the 66 weeks before the expected week of childbirth
- I consent to the amount of SPL which the mother intends to take, as set out in Section D above.
- I consent to the mother's employer processing the information I have provided
- I consent to the amount of ShPP which the mother intends to take, as set out in Section E above.

•	The information	nrovided i	n this	declaration	is accurate

Signature of partner	
Date partner signed	