

**Mother’s** notices and declarations for Shared Parental Leave and Pay

**Instructions**

These are the forms you need to complete to take Shared Parental Leave (SPL). If your employer has their own forms these can be used instead. There are 3 sections in this form. You may submit sections 1 - 3 to your employer before issuing your period of leave notice(s), or you may choose to submit these sections with your first period of leave notice.

1. **Mother’s notice and declaration for Shared Parental Leave & Father/partner’s declaration**
2. **Maternity Entitlement Curtailment Notice** (if the mother has not already returned to work)
3. **Mother’s notice and declaration for Shared Parental Pay & Father/partner’s declaration**

**Period of leave notice(s)** this noticemust be provided to your employer at least 8 weeks before your first period of Shared Parental Leave starts.

**Section 1: Mother’s notice for Shared Parental to their employer**

|  |  |
| --- | --- |
| **You (the mother)** | **Partner** |
| Surname: | Surname: |
| First names(s): | First names(s): |
| **Child** | |
| What is the child’s expected date of birth/actual date of birth (delete as appropriate)?  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | |

|  |  |
| --- | --- |
| **Maternity Leave** | |
| Date Maternity Leave will start/started  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | Date Maternity Leave will end/ended  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ |

|  |  |
| --- | --- |
| **Shared Parental Leave** | |
| Number of weeks of Shared Parental Leave available[[1]](#footnote-1) | Number of weeks of Shared Parental Leave the mother intends to take: |
|  | Number of weeks of Shared Parental Leave the partner intends to take (if any) |

**Section 1 continued: Mother’s notice for Shared Parental Leave to their employer**

**Non-binding indication of when you plan to take Shared Parental Leave (SPL)**

At the date of this notice I intend to take Shared Parental Leave between the following weeks:

|  |  |
| --- | --- |
| Week commencing (Sunday) | Week ending (Saturday) |

**My blocks of leave will typically start on a:**

Mon Tue Wed Thu Fri Sat Sun

**Section 1 continued: Mother’s declaration to their employer for Shared Parental Leave**

I am entitled or will be entitled to take Shared Parental Leave.

I have, or will have been, continuously employed for 26 weeks by the end of the 15th week before the child is due.

I will remain employed with my employer until any period of Shared Parental Leave 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 the father/partner who has made the declaration in this section).

I will provide additional evidence to my employer (on request) if my employer asks for this within 14 days of the date of this notice.

I will inform my employer immediately if I cease to care for my child or cease to be eligible for Shared Parental Leave for any reason.

I confirm that the information provided in this section is correct.

**Mother’s signature**

Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

**Section 1 continued: Father/Partner’s declaration to Mother’s employer**

I have (or will have) the main responsibility for the care of the child at the time of the child’s birth (along with the child’s mother).

I am the father of the child and/or at the date of the child's birth, I was (or will be) the mother’s: spouse, civil partner; or a partner living with the mother and her child in an enduring family relationship.

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.

During 13 of those 66 weeks, I had, or will have, weekly earnings that are not less than the 'lower earnings limit'.

I consent to the mother taking the period or periods of Shared Parental Leave that she has indicated in this section.

I consent to the mother’s employer processing the information about me provided in the Mother’s Notice of Entitlement and Intention and in this Declaration (section 1).

I confirm that the information provided in this section is correct.

**Father/Partner’s National Insurance Number** **(or if the father/Partner does not have a National Insurance number confirmation that is the case)**

**Father’s home address**

**Father/Partner’s signature**

Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

**Section 2: Mother’s notice to curtail maternity entitlement** (if the mother has not already returned to work)

**Instructions**

You should only complete this section if:

* You are the child’s mother
* You are ending your Maternity Leave and /or Maternity Pay early to enable you and/or your partner to take Shared Parental Leave.
* You must submit this form at least 8 weeks before you and/or your partner take Shared Parental Leave.

**Mother’s name**

**Maternity Leave curtailment notice:**

Start date of Maternity Leave: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

I would like my Maternity Leave to end on: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

Total number of weeks of Maternity Leave taken  by the date that Maternity Leave ends.

**Statutory Maternity Pay curtailment notice (only if claiming Shared Parental Pay)**

Start date of Statutory Maternity Pay: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

I would like my Statutory Maternity Pay to end on: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

Total number of weeks of Statutory Maternity Pay paid  by date Statutory Maternity Pay ends.

**Notice to employer:**

Please accept this as my notice to curtail my Maternity Leave and/or my Statutory Maternity Pay entitlement.

Notice of Entitlement and Intention to Shared Parental Leave is set out in Section 1 of this document.

I understand that my Maternity Leave and/or my Statutory Maternity Pay will end on the dates that I have given above. I understand that I can only reinstate my Maternity Leave or Statutory Maternity Pay if I revoke (withdraw) this notice before that date.

**Mother’s signature**

Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

**Section 3: Mother’s notice for Shared Parental Pay to their employer**

**Non-binding indication of when you plan to take Statutory Shared Parental Pay (ShPP)**

I am entitled to a total of **[         ]** weeks of Statutory Shared Parental Pay. Of this total amount

* the number of weeks in respect of which I intend to claim Statutory Shared Parental Pay is **[         ]**.
* the number of weeks in respect of which the Father or Partner intends to claim Statutory Shared Parental Pay is **[         ]**.

At the date of this notice I intend to take Statutory Shared Parental Pay between the following weeks:

|  |  |
| --- | --- |
| Week commencing (Sunday) | Week ending (Saturday) |

**My blocks of pay will typically start on a:**

Mon Tue Wed Thu Fri Sat Sun

**Section 3 continued: Mother’s Declaration to their employer for Shared Parental Pay**

I am entitled to Shared Parental Pay. I am (or will be) entitled to Statutory Maternity Pay. I will remain employed with this employer until any period of Shared Parental Leave I intend to take.

I have (or will have) worked for the same employer for at least 26 weeks by the end of the 15th week before the child is due. I will (or have been) in ‘employed earners employment’[[2]](#footnote-2) in this period.

For the eight weeks, immediately before the 15thweek before the child is due my normal weekly earnings were at least equal to the ‘lower earnings limit’.

I am entitled to statutory maternity pay in respect of the child and have reduced (or will reduce) my maternity pay period and the remainder will be available as Shared Parental Pay.

The Maternity Pay period in respect of the child has been reduced (or will be reduced) before I claim any Shared Parental Pay.

The Maternity Pay period will continue to be reduced during any periods in which I claim Shared Parental Pay. I confirm that the information provided in this section is correct.

**The maternity pay period:**

Began (or will begin) on: Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

Is (or will be) reduced by: Number of weeks 

I will immediately inform the employer if, during or between any periods in which I claim Shared Parental leave Pay, the maternity pay period in respect of the child ceases to be reduced.

I intend to care for the child during any week in respect of which Shared Parental Pay is paid to me.

I will be absent from work during each week in respect of which Shared Parental Pay is paid to me, except where I have arranged to work a shared parental leave keeping in touch day.

**If claiming shared parental leave and pay**

I will be on shared parental leave during each week in respect of which shared parental pay is paid to me.

**If claiming shared parental pay only (i.e. if you have been redundant)**

I am no longer an employee of [**insert the name of the employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**] and so am not entitled to shared parental leave.

**Mother’s signature**

Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

**Section 3 continued: Father/Partner’s declaration to Mother’s employer**

I have (or will have) the main responsibility for the care of the child at the time of the child’s 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.

During 13 of those 66 weeks, I had, or will have, weekly earnings that are not less than the 'lower earnings limit'.

I consent to the overall amount of Shared Parental Leave Pay to which the Mother intends to claim and the period or periods during which she intends to claim it as set out above.

I consent to the mother’s employer processing the information about me provided in the Mother’s Notice of Entitlement and Intention and in this Declaration (section 3).

**Father/Partner’s National Insurance Number (or if the father/Partner does not have a National Insurance number confirmation that is the case)**

**Father’s home address**

**Father/Partner’s signature**

Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

**Period of Leave Notice 1 of 3**

**For employers only**: for guidance on statutory pay collections visit [**https://www.gov.uk/government/collections/statutory-pay**](https://www.gov.uk/government/collections/statutory-pay)

**Instructions**

When you have decided your Shared Parental Leave date are final, you must ‘book’ your leave by submitting this Period of Leave notice to your employer not less than 8 weeks before your first week of leave is due to start.

You are entitled to submit up to 3 Period of Leave notices to your employer, with each notice requesting one continuous period of leave. The minimum amount of leave you can request is one week.

One booked, you can change your dates, but you will have to give another Period of Leave notice which will count towards your limit of 3 Period of Leave notices.

**Period of Leave**

|  |  |
| --- | --- |
| **Shared Parental Leave start date** | **Shared Parental Leave end date** |

**If you want to submit a notice which requests discontinuous periods of leave (the rows below), approval will be at your employer’s discretion.** Your employer has 2 weeks from the date that the notice was given to agree to the periods of leave requested, to propose alternative dates for the periods of leave or to refuse the periods of leave requested without proposing alternative dates. If your employer refuses your leave dates or you don’t agree with their alternative dates proposed, you will still be entitled to take the total amount of leave you’ve requested but as a single continuous period of leave.

**If you do not know your exact start and end dates because your child has been born, complete the sentence below:**

I will take weeks of Shared Parental Leave. It will start weeks after my Maternity Leave ends.

**Notice to employer:**

Please accept this as a binding notice to take Shared Parental Leave on the date or the week specified above.

**Mother’s signature**

Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

**Period of Leave Notice 2 of 3**

**Instructions**

When you have decided your Shared Parental Leave date are final, you must ‘book’ your leave by submitting this Period of Leave notice to your employer not less than 8 weeks before your first week of leave is due to start.

You are entitled to submit up to 3 Period of Leave notices to your employer, with each notice requesting one continuous period of leave. The minimum amount of leave you can request is one week.

One booked, you can change your dates, but you will have to give another Period of Leave notice which will count towards your limit of 3 Period of Leave notices.

**Period of Leave**

|  |  |
| --- | --- |
| **Shared Parental Leave start date** | **Shared Parental Leave end date** |

**If you want to submit a notice which requests discontinuous periods of leave (the rows below), approval will be at your employer’s discretion.** Your employer has 2 weeks from the date that the notice was given to agree to the periods of leave requested, to propose alternative dates for the periods of leave or to refuse the periods of leave requested without proposing alternative dates. If your employer refuses your leave dates or you don’t agree with their alternative dates proposed, you will still be entitled to take the total amount of leave you’ve requested but as a single continuous period of leave.

**If you do not know your exact start and end dates because your child has been born, complete the sentence below:**

I will take weeks of Shared Parental Leave. It will start weeks after my Maternity Leave ends.

**Notice to employer:**

Please accept this as a binding notice to take Shared Parental Leave on the date or the week specified above.

**Mother’s signature**

Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

**Period of Leave Notice 3 of 3**

**Instructions**

When you have decided your Shared Parental Leave date are final, you must ‘book’ your leave by submitting this Period of Leave notice to your employer not less than 8 weeks before your first week of leave is due to start.

You are entitled to submit up to 3 Period of Leave notices to your employer, with each notice requesting one continuous period of leave. The minimum amount of leave you can request is one week.

One booked, you can change your dates, but you will have to give another Period of Leave notice which will count towards your limit of 3 Period of Leave notices.

**Period of Leave**

|  |  |
| --- | --- |
| **Shared Parental Leave start date** | **Shared Parental Leave end date** |

**If you want to submit a notice which requests discontinuous periods of leave (the rows below), approval will be at your employer’s discretion.** Your employer has 2 weeks from the date that the notice was given to agree to the periods of leave requested, to propose alternative dates for the periods of leave or to refuse the periods of leave requested without proposing alternative dates. If your employer refuses your leave dates or you don’t agree with their alternative dates proposed, you will still be entitled to take the total amount of leave you’ve requested but as a single continuous period of leave.

**If you do not know your exact start and end dates because your child has been born, complete the sentence below:**

I will take weeks of Shared Parental Leave. It will start weeks after my Maternity Leave ends.

**Notice to employer:**

Please accept this as a binding notice to take Shared Parental Leave on the date or the week specified above.

**Mother’s signature**

Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

1. This number is 52 minus the number of weeks of Maternity Leave the Mother will have taken when her Maternity Leave ends. A minimum of 2 weeks maternity leave must be taken. [↑](#footnote-ref-1)
2. by which I mean I work for my employer in a capacity in relation to which class 1 National Insurance Contributions must be paid [↑](#footnote-ref-2)