

**Father/Partner’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 and 2 to your employer before issuing your period of leave notice(s), or you may choose to submit these sections along with your first period of leave notice. d

1. **Father/Partner’s notice and declaration for Shared Parental Leave & Mother’s declaration**
2. **Father/Partner’s notice and declaration for Shared Parental Pay & Mother’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: Father/Partner’s notice to their employer for Shared Parental Leave**

|  |  |
| --- | --- |
| **You (the father/partner)** | **Mother** |
| 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 Mother's Maternity Leave will start  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | Date Mother's Maternity Leave will end  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ |
| **Statutory Maternity Pay** (only complete if the mother is not eligible for Maternity Leave or Maternity Allowance) | |
| Date Mother's Maternity Pay will start  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | Date Mother's Maternity Pay will end  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ |
| **Maternity Allowance** (only complete if the mother is not eligible for Maternity Leave or Statutory Maternity Pay) | |
| Date Mother's Maternity Allowance will start  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | Date Mother's Maternity Allowance will end  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ |

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

**Section 1 continued: Father/Partner’s notice to their employer for Shared Parental Leave**

**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: Father/Partner’s declaration to their employer for Shared Parental Leave**

I am entitled and intend to take Shared Parental Leave.

I 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 remain employed with my employer until any period of Shared Parental Leave that I intend to take.

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 had (or will have) the main responsibility for the care of the child at the time of the child’s birth (along with the mother who has made the declaration in Section 2).

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 the child, or if the mother informs me that she has ceased to be eligible for Shared Parental Leave because the mother ceases to be entitled to maternity leave, maternity pay or maternity allowance.

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

**Father/Partner’s signature**

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

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

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 child’s father/my partner).

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 father/partner taking the period or periods of Shared Parental Leave that they have indicated in this section.

I will immediately inform the father/partner’s employer if I cease to be eligible for Shared Parental Leave because I cease to care for the child or I cease to be entitled to maternity Leave, maternity pay or maternity allowance.

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

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

**Mother’s National Insurance Number (or if no National Insurance number confirmation that is the case)**

**Mother’s home address**

**Mother’s signature**

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

**Section 2: Father/Partner’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 Mother 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 2 continued: Father/Partner’s declaration for Shared Parental Pay to their employer**

I am entitled to Shared Parental Pay.

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 15th week before the child is due my normal weekly earnings were at least equal to the ‘lower earnings limit’.

I will remain employed with this employer until any period of Shared Parental Leave I intend to take.

I intend to care for the child during each 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.

I will immediately inform the employer if, during or between any periods in which I claim shared parental pay, the maternity pay period in respect of the child is no longer reduced.

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

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

**Father/Partner’s signature**

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

**Section 2 continued: Mother’s declaration to Partner’s employer**

I consent to the overall amount of Shared Parental Pay to which the Father/Partner intends to claim and the period or periods during which he or she intends to claim it as set out in section 2 above.

I consent to the father/partner’s employer processing the information about me provided in this section. I will immediately inform my employer if the maternity pay or allowance period ceases to be reduced.

**Complete the following section if eligible for Maternity Pay:**

I am entitled to Statutory Maternity Pay in respect of the child.

Before any shared parental pay is claimed by me or the Father/Partner, I have reduced (or will have) reduced the maternity pay period in respect of the child.

I have reduced (or will have) reduced the maternity pay period by giving a maternity curtailment notice to my employer that fixes the date on which the maternity pay period will end.

The maternity pay period will remain reduced after the submission of that curtailment notice.

**The maternity pay period:**

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

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

**Complete the following section if eligible for Maternity Allowance:**

I am entitled to Maternity Allowance in respect of the child.

I have reduced (or will have) have reduced the maternity allowance period in respect of the child before any shared parental pay is claimed by me, or the Father/Partner.

I will reduce my maternity allowance by advising the Department of Work and Pensions and fix the date on which my maternity allowance period will end.

The maternity allowance period will remain reduced after notifying the Department of Work and Pensions.

**The maternity allowance period:**

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

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

**Mother’s National Insurance Number (or if no National Insurance number confirmation that is the case)**

**Mother’s home address**

**Mother’s signature**

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

**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)

**Period of Leave Notice 1 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 not yet been born, complete the sentence below:**

I will take weeks of Shared Parental Leave. It will start weeks after my child’s expected due date.

**Notice to employer:**

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

**Father/Partner’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 not yet been born, complete the sentence below:**

I will take weeks of Shared Parental Leave. It will start weeks after my child’s expected due date.

**Notice to employer:**

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

**Father/Partner’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 not yet been born, complete the sentence below:**

I will take weeks of Shared Parental Leave. It will start weeks after my child’s expected due date.

**Notice to employer:**

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

**Father/Partner’s signature**

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

1. This number is 52 minus the number of weeks of Maternity Leave or Statutory Pay or Maternity Allowance the Mother will have taken when their Maternity leave, Statutory Maternity Pay or Maternity Allowance 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)