

**Child through Adoption: Adopter’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. **Adopter’s notice and declaration for Shared Parental Leave & Partner’s declaration**
2. **Adoption entitlement curtailment notice** (if the Adopter has not already returned to work)
3. **Adopter’s notice and declaration for Shared Parental Pay & 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: Adopter’s notice to their employer for Shared Parental Leave**

|  |  |
| --- | --- |
| **You** (the Adopter - the parent eligible for Adoption Leave) | **Partner** (the parent eligible for Paternity Leave) |
| Surname: | Surname: |
| First names(s): | First names(s): |
| **Child** | |
| When were you notified of a match with the child?  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | When did or when will the child start to live with you? \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ |

|  |  |
| --- | --- |
| **Adoption Leave** | |
| Date Adoption Leave will start/started  \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | Date Adoption 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 Adopter intends to take |
|  | Number of weeks of Shared Parental Leave the partner intends to take (if any) |

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

I am entitled to and intend to take Shared Parental Leave.

I have (or will have) the main responsibility for the care of the child at the time of the child’s placement (along with the partner who has made the declaration in Section 3).

I have (or will have) been continuously employed for 26 weeks before the week in which we were notified of being matched for adoption with the child. I will remain employed with my employer until any period of Shared Parental Leave that I intend to take.

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.

**Adopter’s signature**

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

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

I have (or will have) the main responsibility for the care of the child at the time of the child’s placement (along with the Adopter who has made the declaration in Section 1).

I am married to or the civil partner or partner of the adopter.

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 week in which I was notified of being matched for adoption with a child.

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 Adopter taking the period or periods of Shared Parental Leave as indicated in Section 1.

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

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

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

**Partner’s home address**

**Partner’s signature**

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

**Section 2: Adopter’s notice to curtail Adoption entitlement** (if the adopter has not already returned to work)

**Instructions**

You should only complete this section if:

* You are the parent eligible for Adoption Leave
* You are ending your Adoption Leave early to enable you and/or your partner to take Shared Parental Leave.

**Adopter’s name**

**Adoption Leave curtailment notice:**

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

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

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

**Statutory Adoption Pay curtailment notice ( if claiming Shared Parental Leave Pay):**

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

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

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

**Notice to employer:**

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

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

I understand that my Adoption Leave and/or my Statutory Adoption Pay will end on the dates that I have given above.

I understand that I can only reinstate my Adoption Leave or Statutory Adoption Pay if I revoke (withdraw) this notice before that date.

**Adopter's signature**

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

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

**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 my 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: Adopter’s declaration to their employer for Shared Parental Pay**

I am entitled to Shared Parental Pay. I am (or will be) entitled to Adoption Pay.

I have, or will have, been continuously employed for 26 weeks before the week in which we were notified of being matched for adoption with the child. I will (or have been) in ‘employed earners employment’[[2]](#footnote-2) in this period.

In the eight weeks immediately before the end of the week in which I was notified of being matched for adoption with the child my normal weekly earnings were at least equal to the ‘lower earnings limit'.

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

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

The Adoption Pay period will continue to be reduced during any periods in which I claim Shared Parental Pay.

**The adoption 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 Pay, the adoption 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.

**Adopter's signature**

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

**Section 3 continued: Partner’s declaration to Adopter’s employer**

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

I have, or will have, been employed or self-employed in England, Scotland, or Wales in the 26 weeks of the 66 weeks before the week in which we were notified of being matched for adoption with the child.

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

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

I consent to the adopter’s employer processing the information about me provided in this section.

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

**Partner’s home address**

**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 not yet been placed with you, complete the sentence below:**

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

**Adopter’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 not yet been placed with you, complete the sentence below:**

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

**Adopter’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 not yet been placed with you, complete the sentence below:**

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

**Adopter’s signature**

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

1. This number is 52 minus the number of weeks of Adoption Leave the Adopter will have taken when their Adoption Leave ends. A minimum of 2 weeks adoption 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)