

Section F – Mother’s/primary adopter’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 Shared Parental Leave (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/placed.
- 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/placement (along with my partner, who has made the declaration below).
- I am entitled to maternity/adoption leave, my maternity/adoption 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
- Maternity only: If my employer asks within 14 days of the date of this notice, 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.
Adoption only: If my employer asks within 14 days of the date of this notice, I will give my employer evidence, in the form of one or more documents issued by the adoption agency that matched me with the child, of (i) the name and address of the adoption agency; (ii) the date that I was notified of having been matched for adoption with the child; and (iii) the date on which the adoption agency expects to place the child with me.
- 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.
- 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 Shared Parental Pay (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/placement.
- I am entitled to SMP/SAP in respect of the birth/placement of our child, my maternity/adoption 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 accurate.

Signed.....

Print.....

Date.....

Section G: Partner’s declaration:

- Maternity only: 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
Adoption only:- I am the adopter’s spouse, the adopter’s civil partner or the adopter’s partner living with them 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/placement (along with the child’s mother/primary 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 expected week of childbirth/placement.
- I have (or will have) earned in total at least £390* in 13 weeks of the 66 weeks before the expected week of childbirth/placement.
*subject to annual review
- I consent to the amount of SPL which the mother/primary adopter intends to take, as set out in Section D above.
- I consent to the mother/primary adopter’s employer processing the information I have provided.
- I consent to the amount of ShPP which the mother/primary adopter intends to take, as set out in Section E above.
- The information provided in this declaration is accurate.

Signed.....

Print.....

Date.....

Appendix E

Notification that Partner is intending to take SPL

1. This form must be completed by the mother's/primary adopter's partner who is entitled to and intends to take SPL (and ShPP if section C is completed).
2. This form must be submitted to the **Town/Parish Clerk** at least eight weeks before the date on which you wish to start the leave and (if applicable) receive ShPP.

Section A - Your Details

Your surname	
Your first name(s)	
Child's expected date of birth/placement	
Actual date of child's birth/placement (if child not yet born/placed please provide this information as soon as reasonably practicable following birth/placement and before any SPL taken)	

Section B - Your Partner (the mother/primary adopters) details

Mother's/primary adopter's surname	
Mother's/primary adopter's first name(s)	
Mother's/primary adopter's Address	
Mother's/primary adopter's National Insurance number (State 'none' if no number is held)	

Section C – Maternity / adoption details

Date mother/primary adopter started (or intends to start) maternity leave (if applicable)	
Date mother's/primary adopter's maternity/adoption leave ended (or will end) (if applicable)	
Total number of weeks of maternity/adoption leave taken (or that will be taken) when maternity/adoption leave ends	
Date mother/primary adopter started (or intends to start) SMP/MA/SAP (if applicable)	
Date mother/primary adopter's SMP/MA/SAP ended (or will end) (if applicable)	
Total number of weeks SMP/MA/SAP has been paid or will have been paid at date of curtailment	

Total number of weeks by which SMP/MA/SAP will be reduced (i.e. 39 weeks minus total number of weeks SMP/MA/SAP has been paid or will have been paid at date of curtailment)	
Total number of weeks of SPL created (50 max)	
Total number of weeks of SPL that I (the partner) intend to take	
Total number of weeks of SPL that the mother/primary adopter intends to take (if applicable)	

Section D - Indication of intentions:

I (the partner) currently expect to take SPL as follows: <i>(Note: It will usually be helpful to answer this in a "From... To..." format)</i>

Section E - Shared Parental pay (only complete if claiming Shared Parental Pay):

Total number of weeks of ShPP created (39 weeks less total number of SMP/SAP taken and any ShPP paid from a previous notice and revocation)	
Total number of weeks of ShPP I intend to take:	
Total number of weeks of ShPP my partner (the mother/primary adopter) intends to take:	
I (the partner) currently expect to take ShPP as follows: Note: It will usually be helpful to answer this in a "From... To..." format	

Section F - Declaration:

- I am giving notice that I am entitled to and intend to take Shared Parental Leave (SPL).
- Maternity only: 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.
Adoption only: I am the adopter's spouse, the adopter's civil partner or the adopter's partner living with them and the child in an enduring relationship.

- I have been (or will be) continuously employed for 26 weeks at the end of the 15th week before the week in which the child is due or will be placed.
- 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 our child at the time of the child's birth/placement (along with the child's mother/primary adopter who has made the declaration below).
- Maternity only: 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.
Adoption only: If my employer asks within 14 days of the date of this notice, I will give my employer evidence, in the form of one or more documents issued by the adoption agency that matched me with the child, of (i) the name and address of the adoption agency; (ii) the date that I was notified of having been matched for adoption with the child; and (iii) the date on which the adoption agency expects to place the child with me.
- 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 the mother's/primary adopter's employer or a declaration that she/he does not have an employer.
- I will inform my employer immediately if I am no longer caring for our child or if my partner revokes her notice to curtail her/his maternity/adoption leave or SMP/MA/SAP period.
- I (or my partner) have given a Period of Shared Parental Leave 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 Shared Parental Pay (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/placement.
- I intend to care for my child in the weeks I receive 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 will remain employed with this employer until before the date of my first period of ShPP.
- The information provided in this declaration is correct.

Signed.....

Print.....

Date.....

Section G – Your partner (the mother / primary adopter) declaration

- I had (or will have) the main responsibility for the care of the child at the time of the birth/placement (along with my partner, who has made the declaration above).
- I am entitled to maternity/adoption leave and/or SMP/MA/SAP in respect of the child and I have curtailed (or will curtail) my entitlement to maternity/adoption leave (or I have returned to work) and/or my entitlement to SMP/MA/SAP.
- I have, 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 childbirth/placement.
- I have (or will have) earned in total at least £390* in 13 weeks of the 66 weeks before the expected week of birth/placement.
*subject to annual review
- I will immediately inform my partner if I revoke my notice to curtail my maternity/adoption leave or, if I am not entitled to maternity/adoption leave, my SMP/MA/SAP entitlement.
- I consent to my partner's intended SPL as set out in Section D above.
- I consent to my partner's employer processing the information I have provided.
- 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 entitled to SMP/MA/SAP, and I have reduced (or will reduce) the SMP/MA/SAP period and the remainder will be available as Shared Parental Pay (ShPP).
- I consent to my partner's intended ShPP as set out in Section E above.
- I will immediately inform my partner if I revoke the reduction of my SMP/MA/SAP.
- I consent to the person who will pay ShPP to my partner or the child's father processing the information I have provided.
- The information provided in this declaration is correct.

Signed.....

Print.....

Date.....

Appendix F

Period of Shared Parental Leave Notice

1. This form must be completed in conjunction with the 'Notice of entitlement and intention to take Shared Parental Leave' form.
2. This form must be submitted to the **Town/Parish Clerk** at least eight weeks before the date on which you wish to start the leave and (if applicable) receive ShPP.
3. Please note that you are only able to submit your period of leave notice (including any variations) a maximum of 3 times.

I intend to take the following number of weeks' Shared Parental Pay (ShPP) (if applicable):

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I intend to take ShPP on the following dates (if applicable):

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Signed.....

Print.....

Date.....

Reviewed & approved Full Council 9th May 2022