**Notice of Entitlement and Intention to take Shared Parental Leave [Mother/Primary Adopter]**

**To be given by the Mother/Primary Adopter**

Dear **[Name/Role of person to whom notice should be given]**

I am writing to let you know that I am eligible for and that my partner and/or I intend to take a period of Shared Parental Leave

I set out below the information that I am required to give you to confirm my entitlement to Shared Parental Leave

|  |  |
| --- | --- |
| My name |  |
| My partner’s name |  |
| My maternity leave started on | Date |
| My maternity leave ended or will end on  | Date |
| The total amount of Shared Parental Leave (in weeks) available to me and my partner is | XX weeks |
| The total amount of statutory shared parental pay (in weeks) available to me and my partner is | XX weeks |
| My child’s expected week of childbirth/date notified of having been matched with a child |  |
| My child’s date of birth/date of placement |  |
| How much Shared Parental Leave and statutory shared parental pay I intend to take (in weeks) | XX weeks |
| How much Shared Parental Leave and statutory shared parental pay my partner intends to take (in weeks) | XX weeks |
| The start and end dates of each period of Shared Parental Leave I intend to take and in which period or periods I intend to claim statutory shared parental pay |  |

I confirm that:

1. I satisfy the following eligibility criteria for Shared Parental Leave or will have satisfied them at the date I take leave:
* I had been employed for 26 weeks at the 15th week before my child’s EWC/date of matching and I will remain in the employment until the week before my first period of Shared Parental Leave
* I have main responsibility for the care of my child with the child’s father/my partner
* I am entitled to statutory maternity leave and I have curtailed my period of maternity leave or have returned to work before the end of my maternity leave
* I have complied with the relevant notification requirements and provided any additional evidence requested
1. The information given in this notice is accurate; and
2. I will inform you immediately if I cease to care for my child.

I enclose a declaration from my partner providing the further information he/she is required to give.

Yours sincerely

[Name]

Date:

**Father’s/partner’s declaration to accompany mother’s/primary adopter’s notice of entitlement**

Dear [name/role of person to whom notice should be given]

Declaration in relation to Shared Parental Leave

I confirm that:

1. I am [name of child]’s father and/or married to, or the civil partner or partner of [name of employee].
2. Together with [name of employee] I have the main responsibility for the care of [name of child].
3. I satisfy the employment and earnings criteria that allow [name of employee] to access Shared Parental Leave.
4. I consent to [name of employee] taking the amount of leave set out in this Shared Parental Leave Notice of Entitlement
5. I consent to you processing the information contained in this declaration for the purposes of [name of employee]’s application for Shared Parental Leave.

I set out below the further information I am required to give you:

|  |  |
| --- | --- |
| My name |  |
| My address |  |
| My national insurance number OR I confirm I do not have a national insurance number |  |

Yours sincerely

Name

Date: