

East Midlands Academy Trust

Supporting Families Guidance

‘Every child deserves to be the best they can be’

Scope: East Midlands Academy Trust & Academies within the Trust

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Filename:

EMAT Supporting Families Guidance

Approval: February 2026

Approved by the Head of People & Culture on behalf of the Executive Leadership team.

Next Review: February 2027

This Guidance will be reviewed annually.

Owner:

Head of People & Culture

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Not Applicable

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Non-Statutory

Replaces previous guidance

| Revision Date | Revisor | Description of Revision |
|------------------|------------|--|
| January 2026 v4 | C Rees | Change in Paternity leave entitlements. |
| February 2025 v3 | C Rees | Addition of Neonatal leave Specifics on entitlements |
| April 2024 | V Donnelly | Downgraded to non-statutory guidance document. |
| October 2023 | A Holton | Introduced policy to enable easy access to rights and benefits for colleagues and ensure correct paperwork is produced within the appropriate timelines. |
| | | |

EMAT Supporting Families

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1. Scope

This guidance applies to all colleagues and officers of EMAT and hereafter is referred to as ‘the Trust’.

This guidance is non-contractual and provides a general summary. It is not meant to be exhaustive and cover every eventuality. We may modify or withdraw it and the MAT owns the right of interpretation. Unless otherwise stated, colleagues are entitled to the benefits provided under the current applicable UK legislation at the time.

2. Purpose

We recognise the right of individuals to take time away from work in connection with childbirth and the purpose of this guidance is to ensure that everyone is clear about entitlements to Shared Parental Leave (ShPL), Statutory Maternity Leave and Pay (SML and SMP) and Statutory Paternity Leave and Pay (SPL & SPP) the process to follow and terms that apply.

3. Responsibilities

Everyone referred to in the guidance is required to make sure they are familiar with and adhere to its contents.

Colleagues and their line manager should agree a plan to keep in touch during maternity/adoption and/or shared parental leave. Managers should ensure colleagues on such leave are kept informed of any relevant business updates and colleagues should ensure they provide appropriate information in the timelines specified in this guidance.

4. Types of leave for new parents

4.1. Neonatal Leave

Neonatal Care Leave will apply to parents of babies who are admitted into neonatal care up to 28 days old and who have a continuous stay in hospital of 7 full days or longer. Eligible parents will be able to take up to 12 weeks of leave (and, if eligible, pay) on top of any other leave they may be entitled to, including maternity and paternity leave.

4.2. Maternity/Adoption Leave

If you are matched for adoption with a child, you may be entitled to either adoption leave or paternity leave. One parent cannot take both periods of leave, and it is up to you and your partner to decide who is the main adopter and so will take adoption leave. The main adopter’s partner may be entitled to take paternity leave – refer to the section on paternity leave for further details.

Maternity/adoption rights and timelines are explained the table below:

| Activity | Timeline Maternity | Timeline Adoption |
|-----------------------------|--------------------|-------------------|
| Minimum time off | 2 weeks | NA |
| Maximum time off | 52 weeks | 52 weeks |
| Ordinary leave (OML or OAL) | First 26 weeks | First 26 weeks |

| Activity | Timeline Maternity | Timeline Adoption |
|---|--|--|
| Additional Maternity Leave (AML or AAL) | Second 26 weeks | Second 26 weeks |
| Notify line manager you are pregnant and expected week of childbirth (EWC) OR once you have been matched and have been given a date for adoption | by end of 15 th week before baby is due (EWC) | As soon after you have been matched as possible |
| Receive a letter confirming dates to comply with and what (if any) SMP/SAP you are entitled to | 28 days after notifying your manager | 28 days after notifying your manager |
| Statutory Maternity/Adoption Leave (SML/SAL) and Statutory Maternity/Adoption Pay (SMP/SAP) entitlements | <ul style="list-style-type: none"> • Notify line manager of EWC • 26 weeks continuous service by 15th week before EWC • Notify line manager 15th week before EWC • Notify line manager when you intend to start maternity leave` | <ul style="list-style-type: none"> • Notify line manager the date you will adopt the child as soon as possible • Notify line manager when you intend to start adoption leave |
| Change of mind on start date of maternity leave | <ul style="list-style-type: none"> • Write to line manager 28 before leave | <ul style="list-style-type: none"> • Write to line manager 28 days before leave if applicable |
| Time off before SML | Please arrange ante natal and other related appointments outside of working hours where possible. You will be entitled to paid time off if this is not possible on all occasions including if you are medically referred to relaxation or other classes | Please arrange adoption and other related appointments outside of working hours where possible. You will be entitled to paid time off if this is not possible on all occasions |
| Health & Safety | A risk assessment will be conducted to ensure your safety during pregnancy which will be repeated when you return from Maternity Leave | |

| Activity | Timeline Maternity | Timeline Adoption |
|--|---|---|
| Risks identified through risk assessment | <p>We may need to take steps if risks are identified in the role you undertake. Examples may be:</p> <ul style="list-style-type: none"> • Change working hours, location or conditions • Offer suitable alternative work (same terms) • Suspend on full pay (unless you have unreasonably refused the above) | |
| Under 26 weeks service – apply for Maternity Allowance through local Jobcentre Plus | As soon as you can | |
| Receive MAT B1 maternity certificate from doctor or midwife | After 20 th week of EWC | |
| Hand in MAT B1 form to line manager | As soon as it is available and no later than above. | |
| Start maternity /adoption leave | <p>11 weeks before EWC or later (any earlier may be considered resignation unless your baby is born earlier) work up to EWC if well enough You or your line manager may refer you to Occupational Health/GP if any health concerns If you are off sick in the last 4 weeks of EWC, maternity leave will start automatically</p> | <p>on the date the child starts living with the colleague or up to 14 days before the expected placement date (UK adoptions) when a colleague has been matched with a child to be placed with them by a UK adoption agency when the child arrives in the UK or within 28 days of this date (overseas adoptions) the day the child's born or the day after (parents in surrogacy arrangements)</p> |
| <p>SMP/SAP payable provided no work is undertaken (NB may vary for supply teachers)</p> | <p>For 39 weeks on normal pay date First 6 weeks at 90% of actual pay and then SMP (or 90% of actual pay if this less)</p> | <p>For 39 weeks on normal pay date First 6 weeks at 90% of actual pay and then SAP</p> |



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| Activity | Timeline Maternity | Timeline Adoption |
|---|--|--|
| | | (or 90% of actual pay if this less) |
| Compulsory maternity leave | 2 weeks immediately after the birth (4 weeks if you perform a manual job) | |
| End of OML/OAL | 26 weeks after leave starts Automatic right of return to the same job | |
| End of AML/AAL | 52 weeks after leave starts Right to return to same or similar job on similar terms and conditions | |
| Further maternity leave | No minimum gap required between pregnancies (SMP may be affected) | |
| If you choose not to return, write to your line manager | If you decide not to return to your role following your maternity leave, you will be required to provide your contractual period of notice in advance of the end of your OML/OAL. If you have been paid OMP, this amount will be repayable at this point. | If you decide not to return to your role following your adoption leave, you will be required to provide your contractual period of notice in advance of the end of your OAL. If you have been paid OMP, this amount will be repayable at this point. |
| During your SML | <ul style="list-style-type: none"> Any benefits will be retained (except those relating to remuneration/pay) Pension contributions will continue to be made by the Trust through OML/OAL You may be required to temporarily return company equipment (e.g. laptop, keys) as they may be needed. | |
| Annual leave | This continues to accrue You are encouraged to take any accrued leave before SML/SAL commences Annual leave accrued whilst on SML/SAL must be taken at the end of SML/SAL | |
| Premature birth | Notify your line manager as soon as possible and | |

| Activity | Timeline Maternity | Timeline Adoption |
|------------------------|---|-------------------|
| | produce a MAT B2 form (from GP/midwife) | |
| Stillbirth/miscarriage | If this is after 24 weeks SMP and SML remain subject to normal service requirements | |

4.3. Paternity leave

Paternity rights and timelines are explained the table below:

| Activity | Timeline |
|---|--|
| Eligibility for Statutory Paternity Leave (SPL): Statutory Paternity Pay (SPP): Colleagues who: have or expect to have responsibility with a partner for raising a child including adoption and/or are: <ul style="list-style-type: none"> the biological father the mothers husband the mother's partner | From 1 April 2026 regardless of length of service you are entitled to paternity leave. Must have worked continuously for 26 weeks ending with 15 th week before EWC or the end of the week in which you were notified of being matched with an adoptive child |
| Leave starts | Any day of the week following the child's birth or adoption |
| Leave ends | Within 52 weeks of child's birth or adoption |
| Length of leave | 2 weeks entitlement. 1 or 2 weeks can be taken individually or together (not odd days) |
| Eligible for statutory paternity pay (SPP) | 1 week's full pay (OPP) and 1-week statutory rate |
| Not eligible for SPP | You may be able to use annual leave or unpaid leave |
| Notify line manager of request for SPL | By 15 th week before EWC or 7 days before adoption date |
| Complete paternity form | 28 days before leave |



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4.4. Shared parental leave

Shared parental leave rights and timelines are explained the table below and also apply to adoption

| Activity | Timeline |
|---|--|
| Mother can start ShPL Must give written notice to employer | From 2 weeks after giving birth |
| Father can start ShPL | Immediately after birth but may want to take paternity leave first (or lose it) |
| How ShPL is calculated | The difference between 52 weeks maternity leave (OML and AML) and how much she has taken |
| Mothers chooses ShPL | Write to line manager to confirm end of SMP/SML and start of ShPL |
| Father can start ShPL | once end date for SMP/L has been confirmed so they can have some time together |
| Qualify for ShPL | Both must have main responsibility for childcare (Mothers partner can apply provided they are the main carer) |
| | Mother must be entitled to SMP or SML |
| | Mother must have given notice to reduce her maternity rights |
| | Mother must still be a colleague at the start of each ShPL |
| | Mother must have 26 weeks service at the end of the 15 th week before child's due date |
| | Father/partner must have worked for at least 26 weeks in the last 66 weeks and earned at least £30 per week |
| | Colleague must notify The Trust in writing with evidence as required |
| Notification of your intention to take ShPL | 8 weeks before leave commencing |
| What to notify | <ul style="list-style-type: none"> • your full name • name of your partner • start and end dates of maternity leave or pay or maternity allowance |



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| Activity | Timeline |
|--------------------------------------|---|
| | <ul style="list-style-type: none"> total ShPL available (based on what is left of maternity) date the baby is due and actual birth date the amount of ShPL you each intend to take– these must be full week blocks but can start on any day of the week a non-binding indication of when you expect to take the leave |
| Signed declaration will include | <ul style="list-style-type: none"> that you meet or will meet the conditions in order to take ShPL that all of the information you have provided is correct, full and accurate who you are (if you are not the mother) confirm that should you become ineligible for ShPL you will notify us immediately |
| Signed declaration from your partner | <ul style="list-style-type: none"> name, address, NI number who they are (mother, father, partner) that they satisfy the qualification as above that they consent to the amount of ShPL you are requesting to take that they consent to us processing the information in the declaration if they are the mother, they will notify us immediately if they are no longer eligible |
| Further request for information | <p>Within 14 days of the start of ShPL</p> <ul style="list-style-type: none"> further evidence of eligibility of partner (e.g. employer's address) copy of child's birth certificate |
| Forms to complete (see appendices) | <ul style="list-style-type: none"> form 1: Mother confirms no intention to take ShPL, but partner will form 2: Mother confirms intention to take ShPL form 3: Mother curtails SML/P (in favour of ShPL) form 4: Father/mothers' partner declaration of intention to take ShPL |



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| Activity | Timeline |
|-----------------------------------|--|
| | (NB forms also confirm individual's eligibility details) |
| Types of ShPL | <ul style="list-style-type: none"> continuous (one block) discontinuous – must be agreed in advance with line manager |
| Request in writing with dates | <p>Response will be received within 14 days</p> <p>Manager may request a meeting to discuss and if so, you may be accompanied (colleague or union representative)</p> |
| Number of requests | 3 – you may vary your request |
| If discontinuous leave is refused | you have the right to withdraw your notification within 15 days of requesting or take a continuous block |
| When can your changed leave begin | You have until 19 th day of the original notification to choose when ShPL starts but it must be at least 8 weeks after the original notification date or that will apply. |
| Variations | <p>Must be in writing</p> <p>Must give 8 weeks' notice of the new start date. <i>A variation due to the child being born early will not count toward your 3 requests.</i></p> |
| Eligible for ShPP | <ul style="list-style-type: none"> Up to 37 weeks ShPP depends on the amount by which the mother reduces her maternity pay period. If eligible you will receive ShPP based on the rate set by the government. |
| Eligibility for ShPP | <ul style="list-style-type: none"> the mother must be entitled SMP or SMA and have reduced the pay period you must intend to care for the child during the weeks the ShPP would be payable your average weekly earnings must exceed lower earnings in force for NI contributions for the 8 weeks leading up to the 15th week before EWC you must remain in continuous employment until the first week of ShPP has begun |



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| Activity | Timeline |
|--|---|
| | <ul style="list-style-type: none"> • you must give proper notification as stated in this guidance |
| What you have to do with 8 weeks' notice | <p>Complete the relevant forms (appendices) to say:</p> <ul style="list-style-type: none"> • how much ShPL is available and how much you each intend to take • start and end dates of maternity pay or allowance • signed declaration • your partner must complete and sign the corresponding form and declaration |
| Other implications during ShPL | <ul style="list-style-type: none"> • your contract of employment continues as usual • you will receive contractual benefits excluding salary. • annual leave should ideally be taken in the year in which it was accrued • Pension contributions made by the Trust will continue at the same rate • Pension deductions from you will be calculated on actual earnings. |

5. Bereaved Partner's Paternity Leave

From 1 April 2026 colleagues are entitled to leave from work of up to 52 weeks, if the child's primary carer has died, the colleague is the child's father or is married to or the civil partner of the child's mother or adopter, and the colleague has the main responsibility of upbringing the child.

Leave must be taken within 52 weeks of the child's or placement for adoption. Where the bereavement occurs within 13 days of the end of that 52-week window, the colleague may still take up to 14 days leave, regardless.

Notice is required in writing and must be provided at least one week before the intended start date. All notices must include the bereavement date, the proposed start date and the child's date of birth or adoption placement. You must include the intended return date and a declaration that the leave is being taken to care for a child and confirmation of the employee's relationship to the child.

You can take up to 10 Keeping in Touch (KIT) days during this leave.



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6. Contact during leave

We have the right to contact you during family leave to enable us to keep you up to date of changes, consult, training – this will be discussed with you before leave starts.

You can agree to work up to 20 days without affecting your ShPP – these are known as ‘Shared Parental Leave in Touch’ or SPLIT and up to 10 days without affecting SMP known as ‘Keep in Touch’ days or KIT. Part days count as days.

Your ShPP/SMP will be topped up to a full day’s pay if you work – there is no obligation to do so and no obligation for the Trust to provide such work. SPLIT/KIT are part of your ShPL/SML and do not add to it.

7. Returning to work after SML/SAL

When you return, you are entitled to request flexible working which will be considered under the Trust’s Flexible Working Policy. If you wish to return from AML/AAL within the 52 weeks you must give 8 weeks’ notice in writing to avoid being postponed until the end of 52 weeks.

You cannot return in the 2 weeks immediately after the baby is born (4 if you perform a manual role)

If you are too ill to return on the due date, notify your line manager and the absence and time off policy will apply.

If you do not want to return at all you need to send a letter of resignation giving the notice required by your contract of employment. If you are returning at the end of your full leave, you are not obliged to notify the Trust, but it would be helpful to enable an effective return.

8. Returning to work after ShPL

You will be informed in writing of the end date of your ShPL, and you should return the day after that. If you cannot return you need to notify the Trust in advance. The Sickness Absence Policy will apply if you cannot return due to ill health.

If you wish to return sooner or vary the date you must do so in writing with 8 weeks’ notice. If your total leave is 26 weeks or less, you are entitled to return to the same job as before. If it is greater, you are still entitled to return to the same job but if this is not possible, we can provide you other employment on no less favourable terms.

If you have taken up to 4 weeks unpaid paternity leave this does not affect the above in terms of returning to the same job. If you take 5 weeks unpaid then the total must be no more than 26 weeks for this to apply.

If your situation changes or you have questions you should contact the Trust.

9. Data Protection

EMAT processes personal data collected when managing colleague’s maternity, paternity or shared parental leave in accordance with its data protection policy. The information collected in order to process such leave is held securely and accessed according to the policy and only for the purposes of responding to leave requests and managing the leave.

Inappropriate access or disclosure of Colleague data constitutes a data breach and should be reported in accordance with the Employers data protection policy immediately. It may also constitute a disciplinary offence which will be dealt with under the disciplinary policy.



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10. Emergency time off for dependants

Colleagues, regardless of length of service, are entitled up to 5 occasions of unpaid time off to deal with incidents and emergencies involving dependants. Dependants could be spouse, partner, child, grandchild, parent or someone who depends on you for care, per rolling year

Situations in which you might take such time off include making alternative arrangements for care when a dependant falls ill or when normal care arrangements have been disrupted or terminated. As a result of the nature of the leave needed, no advance notice is required, and the expected absence should be minimal. This is covered under the absence and time off policy.

11. Carer's Leave

Colleagues, regardless of length of service, are entitled to up to one week of carer's leave every rolling 12 months. The purpose of this is to give or arrange care for a dependant who has:

- A physical or mental illness or injury means they are expected to need care for more than 3 months
- A disability (as defined in the Equality Act 2010)
- Care needs because of their old age

A week means the length of time they usually work over 7 days. You can either take a whole week off or take individual days throughout the year. You are expected to provide notice of at least twice as long as the requested leave. If you have the need to care for more than one person you cannot take a week for each dependent.

The request doesn't have to be in writing nor do colleagues have to provide evidence of their dependant's care needs.

Carers leave request cannot be refused but the Trust can request it to be taken at an alternative time.

12. Other

Fraudulent claims will result in an investigation which could lead to disciplinary action.

13. Confirmation Father/Partner is taking ShPL Only

| SECTION A: General (must be completed) | |
|---|--|
| Please accept this as notification that I (the mother) do not intend to take ShPL (or ShPP where relevant) but that my father/Partner will be. | |
| Mother's surname | |
| Mother's first name(s) | |
| Department | |
| SECTION B: Confirmation | |
| <ul style="list-style-type: none"> I am either not entitled to ShPL (or ShPP where relevant), or I do not intend to take ShPL (or claim ShPP where relevant) I declare that my father/Partner has given a notice to their employer to take ShPL and/or ShPP. I consent to my father/Partner's intended claim for ShPL and/or ShPP. | |
| SECTION C: Signature (must be completed) | |
| Signature of mother | |
| Date signed | |



14. Notification of Intention to Take ShPL (Mother)

| SECTION A: General (must be completed) | |
|---|--|
| Please accept this as notification that I (the mother) am entitled to and intend to take ShPL (and ShPP if section C is completed). | |
| Mother's Surname | |
| Mother's First name(s) | |
| Father/Partner's surname | |
| Father/Partner's first name(s) | |
| Father/Partner's Address | |
| Father/Partner's National Insurance number (State 'none' if no number is held) | |
| Child's expected date of birth | |



| | |
|--|--|
| Actual date of child's birth (if child not yet born, I will provide this information as soon as reasonably practicable following birth and before I take any ShPL) | |
| SECTION B: Maternity entitlement details (all answers that apply must be completed) – includes adoption leave | |
| Date mother started (or intends to start) statutory maternity leave | |
| Date mother's statutory maternity leave ended (or will end) | |
| Total number of weeks of statutory maternity leave that will have been taken at the date that statutory maternity leave ends | |
| Date mother started (or intends to start) SMP or MA | |
| Date mother's SMP or MA ended (or will end) | |
| Total number of weeks SMP or MA has been paid or will have been paid at date of curtailment | |
| Total number of weeks by which SMP or MA will be reduced (i.e. 39 weeks minus total number of weeks SMP or MA has been paid or will have been paid at date of curtailment) | |
| SECTION C: Amount of ShPL available (must be completed) | |



| | |
|--|--|
| Total number of weeks of ShPL created (52 weeks less total number of maternity weeks taken and any ShPL from a previous notice and revocation) | |
| Total number of weeks of ShPL I (the mother) intend to take | |
| Total number of weeks of ShPL my Father / Partner intends to take | |
| SECTION D: Indication of Mother's leave intentions (must be completed but is not binding) | |
| I (the mother) currently expect to take ShPL as follows: | |
| Note: It will usually be helpful to answer this in a "From... To..." format | |
| SECTION E: Amount of ShPP available (only complete if claiming ShPP) | |
| Total number of weeks of ShPP created (39 weeks less total number of SMP taken and any ShPP paid from a previous notice and revocation) | |
| Total number of weeks of ShPP I (the mother) intend to take: | |
| Total number of weeks of ShPP my Father/Partner intends to take: | |



| | |
|---|--|
| <ul style="list-style-type: none"> • 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 | |
| Signature of mother | |
| Date mother signed | |
| SECTION G: Father/Partner's declaration (must be completed) | |
| <ul style="list-style-type: none"> • 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 • I had (or will have) the main responsibility for the care of our child at the time of the 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 • I have (or will have) earned in total at least £390 in 13 weeks of the 66 weeks before the expected week of childbirth • I consent to the amount of SPL which the mother intends to take, as set out in Section D above. • I consent to the mother's employer processing the information I have provided • I consent to the amount of ShPP which the mother intends to take, as set out in Section E above. • The information provided in this declaration is accurate | |
| Signature of Father / Partner | |
| Date Father / Partner signed | |

15. Curtailment of Maternity Leave and Pay

| SECTION A: General (must be completed) | |
|---|--|
| <p>Please accept this as my notice to curtail my maternity leave and/or SMP. This form is accompanied by notification that either I intend to take ShPL and/or ShPP or that my father/ Partner intends to take ShPL and/or ShPP.</p> <p>I understand that my maternity leave will end on the date given in Section B and that my SMP will end on the date given in Section C. I understand that I can only reinstate my maternity leave if I revoke this notice before the curtailment date given in Section B.</p> <p>I understand that if I am eligible for myself or my father/Partner to opt into ShPL and ShPP I can only reinstate my SMP if I revoke this notice before the end date given in Section C.</p> | |
| Mother's surname | |
| Mother's first name(s) | |
| Child's expected date of birth | |
| Actual date of child's birth (if born) | |
| SECTION B: Curtailing maternity leave (must be completed) | |
| Date statutory maternity leave started/is intended to start | |
| Date statutory maternity leave will come to an end | |



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| Total number of weeks of statutory maternity leave that will have been taken at the date that statutory maternity leave ends | |
| SECTION C: Curtailing maternity pay (only complete if claiming ShPP) | |
| Date SMP started/is intended to start | |
| Date SMP will come to an end | |
| Total number of weeks of SMP that will have been paid at the date that SMP ends | |
| SECTION D: Signature (must be completed) | |
| Signature of mother | |
| Date signed | |

16. Notification of Father/Partner Intentions to take ShPL

| SECTION A: General (must be completed) | |
|--|--|
| Please accept this as notification that I (the father/mother's Partner) am entitled to and intend to take ShPL (and ShPP if section C is completed). | |
| Father/Partner's Surname | |
| Father/Partner's First name(s) | |
| Mother's surname | |
| Mother's first name(s) | |
| Mother's Address | |
| Mother's National Insurance number (State 'none' if no number is held) | |
| Child's expected date of birth | |
| Actual date of child's birth (if child not yet born, I will provide this information as soon as reasonably practicable following birth and before I take any ShPL) | |
| SECTION B: Maternity entitlement details (all answers that apply must be completed) | |
| Date mother started (or intends to start) maternity leave (if applicable) | |



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| Date mother's maternity leave ended (or will end) (if applicable) | |
| Total number of weeks of maternity leave taken (or that will be taken) when maternity leave ends | |
| Date mother started (or intends to start) SMP or MA (if applicable) | |
| Date mother's SMP or MA ended (or will end) (if applicable) | |
| Total number of weeks SMP or MA has been paid or will have been paid at date of curtailment | |
| Total number of weeks by which SMP or MA will be reduced (i.e. 39 weeks minus total number of weeks SMP or MA has been paid or will have been paid at date of curtailment) | |

| SECTION C: Amount of ShPL available (must be completed) | |
|--|--|
| <p>The total number of weeks of SPL created depends on the mothers leave and pay entitlements:</p> <ul style="list-style-type: none"> • If the mother was/is entitled to maternity leave and SMP/MA, the total created will be 52 weeks less any week's maternity leave taken • If the mother was/is entitled to maternity leave but not to SMP or MA, the total created will be 52 weeks less any week's maternity leave taken • If the mother was/is not entitled to maternity leave but was entitled to SMP/MA, the total created will be 52 weeks less any weeks of SMP/MA that was paid • If the mother previously revoked her curtailment notice any ShPL that was taken by the father/ Partner must be deducted | |
| Total number of weeks of ShPL created (50 max) | |
| Total number of weeks of ShPL I (the Father/Partner) intend to take | |



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|--|--|
| Total number of weeks of ShPL the mother intends to take (if applicable) | |
| SECTION D: Indication of Father/Partner's leave intentions (must be completed but is not binding) | |
| I (the father/Partner) currently expect to take ShPL as follows: | |
| <p>Note: It will usually be helpful to answer this in a "From... To..." format</p> | |
| SECTION E: Amount of ShPP available (only complete if claiming ShPP) | |
| Total number of weeks of ShPP created (39 weeks less total number of SMP/MA taken and any ShPP paid from a previous notice and revocation) | |
| Total number of weeks of ShPP I (the Father/Partner) intend to take: | |
| Total number of weeks of ShPP mother intends to take: | |
| I (the father/Partner) currently expect to take ShPP as follows: | |
| <p>Note: It will usually be helpful to answer this in a "From... To..." format</p> | |



SECTION F: Father / Partner's declaration (must be completed)

The following points apply in all circumstances:

- I am giving notice that I am entitled to and intend to take ShPL
- I am the father of the child, or at the time 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
- 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
- I will remain employed with this employer until any period of ShPL 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 (along with the child's mother who has made the declaration below)
- 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
- I will give my employer the name and address of the mother's employer or a declaration that she does not have an employer if my employer asks for this within 14 days of the date of this notice
- 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 maternity leave or SMP/maternity allowance period
- I (or my Partner) have given a period of ShPL notice
- The information provided in this declaration is accurate and meets the notification requirements for ShPL

The following points only apply if Section E has been completed:

- I am giving notice that I am entitled to and intend to take 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
- 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 ShPL in those weeks (if entitled to ShPL)
- 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

| | |
|---------------------------------|--|
| Signature of Father/ Partner | |
| Date Father/Partner signed | |

SECTION G: Mother's declaration (must be completed)

The following points apply in all circumstances:

- I had (or will have) the main responsibility for the care of the child at the time of the birth (along with my father/Partner who has made the declaration above)
- I am entitled to maternity leave and/or SMP or MA in respect of the child and I have curtailed (or will curtail) my entitlement to maternity leave (or I have returned to work) and/or my entitlement to SMP or MA.
- 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
- I have (or will have) earned in total at least £390 in 13 weeks of the 66 weeks before the expected week of birth
- I will immediately inform my father/Partner if I revoke my notice to curtail my maternity leave or, if I am not entitled to maternity leave, my SMP or MA entitlement
- I consent to my father/Partner's intended ShPL as set out in Section D above
- I consent to my father/Partner's employer processing the information I have provided
- The information provided in this declaration is accurate and meets the notification requirements for ShPL

The following points only apply if Section E has been completed:

- I am entitled to SMP or MA, and I have reduced (or will reduce) the SMP or MA period and the remainder will be available as ShPP
- I consent to my father/Partner's intended ShPP as set out in Section E above
- I will immediately inform my Father/Partner if I revoke the reduction of my SMP or MA
- I consent to the person who will pay ShPP to my father/Partner or the child's father processing the information I have provided
- The information provided in this declaration is correct

Signature of mother

Date mother signed