**Form 5: Request to Book (or Vary) Shared Parental Leave (SPL)**

* Please refer to the Shared Parental leave Policy before completing this form.
* This form is to be used to book SPL or vary the information you previously provided via this form.
* You may only book/vary the amount of SPL you wish to take up to three times and so this form may only be used three times in total.
* Please ensure that this form is submitted to you line manager and HR at least 8 weeks before the start of the first period of leave.
* Both parents must sign the declaration to confirm their agreement to any variation.

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| **SECTION A: General** | | | |
| Name of Employee | | |  |
| Name of other parent | | |  |
| **SECTION B: Amount of Shared Parental Leave** | | | |
| Total amount of Shared Parental Leave available (in full weeks, e.g. 52 weeks minus the number of weeks maternity/adoption leave/pay taken or to be taken by the end date of maternity) | | |  |
| The Amount of Shared Parental Leave Employee Intends to Take, including dates | | | Total weeks:  Dates: |
| The Amount of Shared Parental Leave Employee’s Partner Intends to Take, including dates | | | Total weeks:  Dates: |
| Shared Parental Pay Scheme  (Please tick which scheme you are opting in to) | | | University Shared Parental Leave Scheme    Statutory Shared Parental Leave Scheme |
| **SECTION C: Employee Declaration** | | | |
| * I confirm that my partner has or will notify their employer of this booking of/variation to the way we intend to share our Shared Parental Leave (and pay) entitlement * I confirm that the total amount of Shared Parental Leave (and pay) does not exceed our joint entitlement. * I confirm that I have complied with the Universities notice period * I confirm that the information I have provided is accurate * Should I or my partner cease to care for the child I will immediately inform the University * I consent to Bangor University processing information contained in this form | | | |
| Signed |  | Date |  |
| **SECTION D: Other Parent’s Declaration** | | | |
| * I confirm that my partner (the employee) and I wish to book/vary the way we will share our Shared Parental Leave entitlement. * I confirm that the information we have provided is accurate * I confirm that I have or will notify my employer of this booking of/variation to the way we intend to share our Shared Parental Leave (and pay) entitlement * I confirm that the total amount of Shared Parental Leave (and pay) does not exceed our joint entitlement. * I consent to Bangor University contacting my employer to confirm Shared Parental Leave details. I understand I may withdraw this consent at any time by contacting Human Resources via email or in writing. | | | |
| Signed |  | Date |  |

**Return by email or post to Catherine Hughes, Human Resources (catherine.hughes@bangor.ac.uk)**