# Notification of Maternity Leave

To be completed no later than the end of the 15th week before the EWC

**SECTION A: To be completed by ALL pregnant employees**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Week of Childbirth (EWC) (from MATB1 form): \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_\_

Date of commencement of maternity leave: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_\_

**SECTION B: To be completed by ALL pregnant employees FOR PAYROLL PURPOSES**

**Please tick the box for the option that applies to you:**

**OPTION 1**: **I intend to return to work after maternity leave**

**OPTION 2:** **I do not intend to return to work**

**OPTION 3:** **I have yet to decide about returning to work**

If you ticked Option 1, please specify **your intended date of return**: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_\_

*(If you want to return to work before this date, you must give BrisDoc at least 8 weeks’ notice)*

**SECTION C: To be completed if you ARE a member of the NHS Pension at BrisDoc**

**Pension Contributions during Maternity Leave**

**1) If you DO intend to return to work:**

Your pension contributions will continue during your period of paid AND if you want, also during your unpaid maternity leave. During the period of unpaid maternity leave, contributions can be paid in arrears upon your return to work. Please choose one of the following three options:

During my unpaid maternity leave,

OPTION 1: I wish for my contributions to be paid in one lump sum in my first pay

packet upon returning to work

OPTION 2: I wish for my contributions to be paid by spreading the payments out

over \_\_\_\_\_\_\_ months upon my return (please specify)

*(Please note that this period must not exceed the length of your unpaid leave)*

OPTION 3: I do NOT wish to contribute into my pension during this time

**2) If you DO NOT intend to return to work:**

Your pension contributions will be paid for the statutory maternity leave only. Your last day of membership will be the last day on which you pay pension contributions.

**3) If you DO NOT KNOW whether you intend to return to work:**

Your pension contributions will be paid for the statutory maternity leave only and then either (1) or (2) will apply.

**SECTION D: To be completed if you DO NOT intend to return to work**

Declaration:

I have read the Maternity Policy, which I understand and accept. I also understand that completion of this form does not replace the normal requirements for notice and that, if I have not already done so I am required to submit my resignation in writing to my line manager and Workforce Team stating the date I intend to terminate my employment.

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

**SECTION E: To be completed by ALL employees**

Declaration:

I have read the Maternity Policy which I understand and accept. I also understand that a change in my circumstances during payment of SMP may affect my entitlement and therefore I agree to notify the Workforce Team of any of the following as soon as possible:

1. If my actual week of childbirth is not the expected week of childbirth as stated on Mat B1 certificate (at the latest this information must be sent within 21 days of the actual date of childbirth).
2. If I start work for another employer after the birth of my baby.
3. If I am taken into legal custody.

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

**Please pass this form together with your Mat B1 certificate to your line manager who will forward to the Workforce Department**

**To be completed by line manager:**

Application for Maternity Leave authorised by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Manager) Date \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_\_\_\_