# Notification of Paternity Leave

Please complete **EITHER** Section A, B or C. **All employees** must complete Section D and E.

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

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION A: To be completed if your partner is expecting a baby**

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| Partner’s Expected Week of Childbirth (EWC) (from MATB1 form) \_\_\_/\_\_\_/\_\_\_\_\_  Expected start date of paternity leave: \_\_\_/ \_\_\_/ \_\_\_\_\_\_  Duration of paternity leave *(tick either option 1 or option 2)*:  **OPTION 1:** 1 week paternity leave  **OPTION 2:** 2 consecutive weeks’ paternity leave  *Please also complete the HMRC SC3 Form (available from the Workforce Team or HMRC website) and attach with this form.* |

**SECTION B: To be completed if you are the partner of someone adopting a child from within the UK**

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| Name and address of adoption agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date you were notified that you had been matched with a child \_\_\_/\_\_\_/\_\_\_\_\_  Date you expect to be matched with a child (as per the matching certificate from the adoption agency) \_\_\_/\_\_\_/\_\_\_\_\_  Expected start date of paternity leave: \_\_\_/ \_\_\_/ \_\_\_\_\_\_  Duration of paternity leave *(tick either option 1 or option 2)*:  **OPTION 1:** 1 week paternity leave  **OPTION 2:** 2 consecutive weeks’ paternity leave  *Please also complete the HMRC SC4 Form (available from the Workforce Team or HMRC website) and attach with this form.* |

**SECTION C: To be completed if you are the partner of someone adopting a child outside of the UK**

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| Name and address of adoption agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date you or the main adopter received official notification of adopting a child from overseas \_\_\_/\_\_\_/\_\_\_\_\_  Date the child is expected to enter the UK \_\_\_/\_\_\_/\_\_\_\_\_  *Please supply official notification of the adoption – this is normally issued by the relevant domestic authority (usually the Department for Children, Schools and Families)*  Expected start date of paternity leave: \_\_\_/ \_\_\_/ \_\_\_\_\_\_  Duration of paternity leave *(tick either option 1 or option 2)*:  **OPTION 1:** 1 week paternity leave  **OPTION 2:** 2 consecutive weeks’ paternity leave  *Please also complete the HMRC SC5 Form (available from the Workforce Team or HMRC website) and attach with this form.* |

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

**Declaration:**

(i) I have read the Paternity Policy which I understand and accept.

(ii) I can confirm that I am not receiving Statutory Adoption Pay/Leave.

(iii) I also understand that a change in my circumstances during payment of SPP may affect my entitlement and therefore I agree to notify the WORKFORCE Department of any changes as soon as possible.

(iv) I will inform BrisDoc if I am taken into legal custody.

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| Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Please pass this form together with the relevant SC3 or SC4 or SC5 Form to your LINE MANAGER who will forward to the WORKFORCE TEAM**

***To be completed by line manager:*** *Application for Paternity Leave authorised by:*

Manager Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_