

Paternity Leave Form

(Birth Child)

In order to give notice of your intention to take paternity leave following the birth of your child, please complete and return this form to your line manager.

leave following the birth of your child. Please state your job Title e.g. the HR Manager>>.

You must give notice of your intention to take paternity leave by the end of the 15th week before the expected week of birth.

leave by the end of the 15th week before the expected week of birth.

Name of employee	<< >>	
Department/Team	<< >>	
Expected week of child's birth (N.B. This is the Sunday at the beginning of the week in which the child is expected to be born)	<< >>	
Actual date of child's birth (if applicable):	<< >>	
This form gives notice of my intention to take paternity leave starting:		
on the date on which the child is born OR	<input type="checkbox"/>	
[State number] days after the child is born OR	<< >>	
on [state date] (a date later than the first day of the child's expected week of birth)	<< >>	

I wish to take: (please indicate below as appropriate)	
One week's paternity leave	<input type="checkbox"/>
Two weeks' paternity leave	<input type="checkbox"/>
I declare that: (please indicate below as appropriate)	
I am the child's biological father OR	<input type="checkbox"/>
I am married to the child's mother OR	<input type="checkbox"/>
I am the civil partner of the child's mother OR	<input type="checkbox"/>
I am the cohabiting partner of the child's mother	<input type="checkbox"/>
AND	
I will have responsibility for the child's upbringing	<input type="checkbox"/>
AND	
I will be absent from work for the purpose of caring for the child or	<input type="checkbox"/>

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supporting the child's mother	
Signed:	
Dated:	

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