# Shared parental leave (ShPL)

## Variation of period of leave notice

This form must be completed by the employee – whether the mother or the partner - who wishes to change the Shared Parental Leave (ShPL) they wish to take after they have already provided a Period of Leave Notice.

* The start date of the first period of ShPL you wish to take must be at least 8 weeks after you have provided this Notice, and 2 weeks after the birth of the child if you are the mother
* ShPL must be taken in blocks of at least 1 week
* Any periods of ShPL that you confirm in this Notice can be changed at a later date by completing a further Variation of Period of Leave Notice. However please note that this and any further variations will constitute a Period of Leave Notice and that you may submit a maximum of 3 Period of Leave Notices
* The mother’s partner can begin a period of ShPL at any time from the date of the child’s birth (although the partner may be entitled to take up to 2 weeks of Paternity Leave following the birth of the child, which the partner may lose if ShPL is taken first)
* The mother and her partner must take any ShPL within 52 weeks of the birth

## Your details

|  |  |
| --- | --- |
| **Full name** |   |
| **Job title** |   |
| **Department** |   |

## Shared parental leave details

I previously provided the University with a Period of Leave Notice dated and I now wish to change my ShPL:

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|   |

I now intend to take ShPL on the following dates (please include the start and end dates for each period of leave that you now intend to take)\*:

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I now intend to take the following number of weeks’ Shared Parental Pay (ShPP) (if applicable):

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|   |

I now intend to take ShPP on the following dates (if applicable):

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|   |

\*Note that the University understands that employees’ plans change. However it is recommended that you and your partner think carefully before submitting this form, as you can only submit your Period of Leave Notice (including any variations) a maximum of 3 times.

## Your Signature

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed** |   | **Date** |   |

## What to do next

* You should complete and submit this form to your Head of Department and send a copy to HR Services, hr-enquiries@york.ac.uk