**This form (Form 1) is for biological mothers or primary adopters who are QMUL employees.**

You can print and fill out this form manually or you can complete and submit it electronically.

The purpose of this form is to end your maternity leave or adoption leave early in order to take Shared Parental Leave. The date on which your maternity leave or adoption leave ends must be:

* at least eight weeks after the date of this notification
* after the end of your compulsory maternity/adoption leave period of two weeks
* at least one week before your maternity leave would otherwise have ended

If you give this notice after the birth or adoption of your child, it is **binding**.If you give this notice before the birth or adoption of your child, it may be withdrawn in writing up to six weeks after your child’s birth or adoption date, provided your maternity leave is ongoing and you have not returned to work.

Other circumstances where the notice **will not remain binding** will be:

* where, within eight weeks of the mother/primary adopter submitting notice to end maternity/adoption leave it transpires that neither parent qualifies for shared parental leave; or
* sadly the mother’s partner dies

**Please complete the details below:**

| QMUL Employee Personal Details | |
| --- | --- |
| QMUL employee number  (found on your payslip or MyHR) |  |
| Title |  |
| First Name |  |
| Surname |  |
| Contact email / phone number |  |
| School / Department / Institute |  |
| Line manager |  |

| Maternity / Adoption Leave Details | |
| --- | --- |
| Start date of Maternity Leave / Adoption Leave |  |
| End date of Maternity Leave / Adoption Leave\* |  |
| Expected week of childbirth |  |
| Date of birth / adoption (if applicable) |  |

**\*The date when maternity/adoption leave has/was curtailed**

**Please select one of the following two options as appropriate:**

I enclose a completed **‘Notice of entitlement and intention to take Shared Parental Leave’**form (Form 2).

**Or**

I confirm that my partner has given his/her employer a notice of entitlement and intention to take Shared Parental Leave and I have consented to the amount of Shared Parental Leave that my partner is intending to take.

| QMUL Employee Declaration | |
| --- | --- |
| I intend to end my maternity leave / adoption leave on the date stated above in order to take Shared Parental Leave.  I understand that the end date of my maternity leave / adoption leave is binding if this notice is submitted after the date of birth or date of adoption of my child.  The information I have given in this notice is accurate. | |
| **Employee’s signature** |  |
| **Date** |  |

**You should send this form to your line manager to complete the declaration below.**

| QMUL Line Manager Declaration | |
| --- | --- |
| I have received and noted this request to end Maternity Leave / Adoption Leave. | |
| **Line manager’s name** *(please print)* |  |
| **Line manager’s signature** |  |
| **Date** |  |

**Please send this form to your HR Administrator.**