**MATERNITY LEAVE NOTIFICATION FORM**



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| Please read the Maternity Leave Procedure and return this form to the HR Hub (hrhub@qub.ac.uk) no later than the end of the fifteenth week before your expected week of childbirth. This form must be accompanied by a Maternity Certificate (MAT B1). If it is not possible to give the required notice, i.e. if the birth is earlier than expected, please complete this form as soon as possible.Maternity payments can only be made when the Maternity Notification Form and Mat B1 Form has been received. |

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| **MATERNITY LEAVE DETAILS** |
| My Expected Week of Childbirth (EWC) is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.1. **ORDINARY MATERNITY LEAVE (OML)**

I wish to take \_\_\_\_ weeks OML (maximum available 26 weeks) and my OML to commence on:\_\_\_\_\_\_\_\_\_\_\_\_\_\_. 1. **ADDITIONAL MATERNITY LEAVE (AML) (maximum available 26 weeks)**

I wish to add \_\_\_\_\_\_ weeks paid AML (maximum available 13 weeks) plus \_\_\_\_\_ weeks unpaid AML (maximum available 13 weeks) to the end of my OML period.My AML will commence on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. |

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| **APPROVAL BY HEAD OF SCHOOL / DIRECTOR / LINE MANAGER** |
| **Name:**  | **Signed:** |
| **Date:**  |

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| **ANNUAL LEAVE** |
| 1. A member of staff is expected, where possible, to take her full annual leave entitlement in a particular leave year. However, should this not be possible due to maternity leave arrangements or exceptional circumstances, she will be able to carry over up to the full complement of leave (43 days) to the next leave year, the scheduling of which must be taken by agreement with the Head of School/Department/Unit.

(ii) If taking Additional Maternity Leave, holidays cannot be taken until the end of this period.(iii) If taking Annual Leave immediately following your Ordinary/Additional Maternity Leave, please coordinate with your Line Manager follow the normal Annual Leave booking process. |

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| **Name:** | **Staff ID:**  |
| **School / Department / Unit:**  |
| People and Culture will keep you informed of internal advertisements for your category of staff at your grade and one grade above during your Maternity Leave. Please provide an email address to facilitate this (if you do not supply an email address we will assume you do not wish to be contacted regarding internal advertisements):**Email address:** |
| In the event that we need to contact you please indicate the preferred method of contact and provide details:**Telephone No: and/or Email address:**  |
| **Signed:** | **Date:** |

 **Please return completed form to HR Hub (****hrhub@qub.ac.uk****), along with a copy of your MAT B1 Form.**