Notice to cancel or vary a period of shared parental leave

Employees should use this form to cancel a period of shared parental leave and pay that has already been booked, or to change the dates of a period of shared parental leave and pay that has already been booked. Employees should complete the form (and include a signature from the other parent where necessary) and return it to the HR department.

Employees must be aware that the Company requires eight weeks’ notice of cancellation or amendments to existing arrangements. Where leave is to be amended, the eight weeks is counted back from the earlier of either the new or original start date. Where leave is to be cancelled, the eight weeks is counted back from the original start date.

Employees may also request that a single period of leave is separated into more than one discontinuous period of leave, or that a series of discontinuous leave is joined to create a single block.

Use this form to cancel or vary a period of shared parental leave (and pay if applicable) as follows:

* vary the start or end date of a period of leave/pay, giving at least eight weeks’ notice before both the new date and the original date
* vary or cancel the amount of leave requested, giving at least eight weeks’ notice before the leave is due to start
* request that a single period of leave become discontinuous periods, or vice versa.

Employees may submit a maximum of three notices to book or amend leave. This notice to change leave already booked will be counted towards the maximum unless:

* you are taking leave on the birth of your baby and the baby arrived earlier or later than the expected week of childbirth
* the Company has asked you to amend your leave dates
* you have discussed your situation with the Company and obtained agreement to submit more than three notices.

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| **NAME** | | | | |
| **Name of employee:** | | | **Name of other parent:** | |
| **Please mark as appropriate:**  I would like to vary the dates of leave I have already booked \_\_\_\_\_\_\_\_\_\_  I would like to cancel leave I have already booked \_\_\_\_\_\_\_\_\_\_ | | | | |
| **DATES OF BOOKED LEAVE WHICH IS TO BE VARIED OR CANCELLED** | | | | |
| **Start date** | **End date** | | | **Number of weeks** |
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| **NEW LEAVE DATES** | | | | |
| **Start date** | **End date** | | | **Number of weeks** |
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| **NEW PAY DETAILS (IF APPLICABLE)** | | | | |
| Number of weeks’ ShPP you have claimed/intend to claim | |  | | |
| Number of weeks’ ShPP the other parent has claimed/intends to claim | |  | | |
| Indication of start and end dates of your ShPP periods | |  | | |
| **DECLARATION** | | | | |
| **Employee’s declaration**    I agree to the variation above.  Employee’s signature:Date: | | | | |
| **Employee’s partner’s declaration\***  (This is needed only in the event that the number of weeks of shared parental pay is changing)  I agree to the variation above.  Employee’s partner’s signature: Date: | | | | |