Employee form to request Statutory Adoption Leave

When complete, please return this form to: *[Insert name and job title]*

Please also keep a copy for your records.

Please ensure a copy of the Matching Certificate is attached.

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| PLEASE READ THESE NOTES BEFORE COMPLETING THE FORM |
| 1. In order for us to process your intention to take adoption leave, we require the information requested on this form. Please complete it in as much detail as possible to enable our smooth processing of your request.2. The child must be under the age of 18 when placed with you and the earliest date you can start adoption leave is 14 days before the date of placement.3. Please inform us of your intention to take adoption leave within seven days of the date you receive notification of being matched with a child. If this is not possible, you must inform us as soon as is reasonably practicable.4. Unless you state otherwise, we will assume that you will take your full entitlement of 52 weeks’ adoption leave. You are able to change your return to work date provided you give us at least 8 weeks’ notice. This applies whether you simply wish to return to work early or because you qualify for shared parental leave and wish to take it.5. If you are adopting from overseas, you must tell us of the date on which the child will enter Great Britain within 28 days of the match notification date. |

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| **EMPLOYEE DETAILS** |
| Employee Name |  |
| Department |  |
| Job Title |  |
| Employment Start Date |  |
| Home Address |  |
| Home Telephone number |  |
| Mobile Phone number |  |
| Email Address |  |
| **ADOPTION LEAVE DETAILS** |
| Name of Adoption Agency: |  |
| Expected date of placement: |  |
| Intended start date of adoption leave: |  |
| Intended return to work date: |  |
| Match date: |  |
| Actual date of placement: |  |
| Actual start date of adoption leave: |  |
| Actual return to work date: |  |
|  |  |
| **Declaration (Tick the statement that is relevant to you):** |
| EITHER - I confirm that I am to be considered as the primary adopter (for the purposes of taking leave) and therefore am to take statutory adoption leave. I understand this means that the secondary adopter (for the purposes of taking leave) may be entitled to take statutory paternity leave. |  |
| OR - I confirm that I am to be considered as the Secondary Adopter and may be entitled to take Statutory Paternity Pay |  |
| Employee signature: |  |
| Date: |  |