

Human Resources

**Declaration of Entitlement to Parental Bereavement Leave**

Please refer to the University’s Parental Bereavement leave policy for details of eligibility

|  |  |
| --- | --- |
| Name  |   |
| Employee Number |   |
| Job title  |   |
| Department  |  |
| Date of Continuous Service |  |
| Date of Death |  |

I confirm that I meet the following eligibility requirements to take Parental Bereavement Leave:

* I am the parent or adult with caring responsibilities

I plan to take Parental Bereavement Leave:

* In a single block of two weeks from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OR
* As two individual weeks:

 Week 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Week 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Does not have to be booked at the same time as week one.

Please note you must provide a minimum of one week’s written notice of your intention to take Parental Bereavement Leave if taken later than 8 weeks’ after the date of loss.

I understand that my entitlement to take Parental Bereavement Leave must be taken and completed within 56 weeks of the date of loss.

|  |  |
| --- | --- |
| Signed: | Date: |

1 May 2020