

**APPLICATION FOR PARENTAL LEAVE**

**Date of request:** \_\_\_\_\_

(applications should be made in conformity with the provisions of the PSMC Manual on Work-Life Balance Measures and Directive 8.1)

SECTION 1: APPLICANT'S DETAILS	
Name:	ID Card No:
Surname:	Office Tel:
Ministry/Entity:	
Department/Directorate:	
Grade/Position	
E-mail:	

SECTION 2: PARENTAL LEAVE APPROVED BY DIRECTORS <i>(tick and fill in as appropriate)</i>
<b>Parental Leave</b> four (4) months broken down in periods of two (2) weeks at a time [ <input type="checkbox"/> ]
four (4) months [ <input type="checkbox"/> ] six (6) months [ <input type="checkbox"/> ] nine (9) months [ <input type="checkbox"/> ] twelve (12) months [ <input type="checkbox"/> ]
<b>Period of Parental Leave being requested:</b> from _____ to _____
I declare that I am: a parent [ <input type="checkbox"/> ] adoptive parent [ <input type="checkbox"/> ] a legal guardian [ <input type="checkbox"/> ] a foster carer [ <input type="checkbox"/> ]
<b>Document(s) supporting request enclosed with application:</b> YES [ <input type="checkbox"/> ] NO [ <input type="checkbox"/> ]
<b>Is spouse / partner in a civil union / partner a Public Employee?</b> YES [ <input type="checkbox"/> ] NO [ <input type="checkbox"/> ]

*(If yes, please attach declaration by the employing Ministry/Entity/Department/ Directorate confirming, or otherwise, that your spouse/partner in a civil union/partner is applying for parental leave. If in the affirmative, the dates and duration of this leave are to be indicated).*

<b>I intend to resume duties on :</b>
I, the undersigned, declare that the information and documentation submitted in this application is correct.
Signature of Applicant: _____ Date: _____

<b>For Official Use:</b> Approved [ <input type="checkbox"/> ] Postponed [ <input type="checkbox"/> ] <i>(if postponed please state reason)</i>
Signature of Director/Head of Dept : _____ Date: _____

*Directors should take disciplinary action when officers fail to resume duty at the expiration of Parental Leave. The information supplied in this application form shall be used exclusively by the employing Ministry and the People & Standards Division for record keeping and verification purposes. Personal information provided on this application form is protected, and used in accordance with the provisions of the Data Protection Act.*

\_\_\_\_\_  
Signature of Head of School

\_\_\_\_\_  
Signature of Head College Network