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| ADOPTION LEAVE NOTIFICATION FORM(Where a child is matched and placed for Adoption within the United Kingdom) |

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| This form can be made available in large print and alternative formats, where required, on request from the HR Hub (hrhub@qub.ac.uk), telephone: 028 9097 3000.Please read the Adoption Leave Procedure and return this form to the HR Hub (hrhub@qub.ac.uk) no later than seven days after notification by the adoption agency of having been matched with a child for adoption. If it is not possible to give the required notice, please complete this form as soon as possible.Adoption payments can only be made when Adoption Notification Form and Matching Certificate have been received. |

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| **ADOPTION LEAVE DETAILS**  |
| The expected date of the placement of the child is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_1. ORDINARY ADOPTION LEAVE (OAL)

I wish to take \_\_\_\_ weeks OAL (maximum available 26 weeks) and my OAL will commence on \_\_\_\_\_\_\_\_\_.1. ADDITIONAL ADOPTION LEAVE (AAL)

I wish to add \_\_\_\_ weeks paid AAL to the end of my OAL period (maximum available 13 weeks) plus \_\_\_\_\_ weeks unpaid AAL (maximum available 13 weeks).My AAL 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 adoptive 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.
2. If taking Additional Adoption Leave, holidays cannot be taken until the end of this period.
3. If taking Annual Leave immediately following your Ordinary/Additional Adoption Leave, please coordinate with your Line Manager follow the normal Annual Leave booking process.
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| **Name:** | **Staff ID:**  |
| **School / Department / Unit:**  |
| **Signed:** | **Date:** |

Please return completed form to HR Hub (hrhub@qub.ac.uk), along with a copy of the Matching Certificate.

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| On receipt of approval the HR Hub will write to the member of staff and the original Application will be retained on the individual’s personal file.The University is committed to promoting equality of opportunity for all staff irrespective of their sex, marital status, perceived religion, political opinion, racial group, sexual orientation, age, having a disability or having dependants.The information contained on this application form will be used in conjunction with information already held on the Diversity and Inclusion Unit’s database to monitor the take-up of and the impact of the University’s work life balance/family friendly arrangements and the implementation of its Equality and Diversity Policy. |