

**Your dates for Leave**

The adoption agency told the person adopting the child that he or she had been matched with the child on

The child is expected to be placed on

And, if the child has been placed, please enter the date he or she was placed

I want to be away from work for one/two\* weeks (\*delete as appropriate)

**Your declaration**

Surname

First Name

**You must tick this box if you are adopting a child with your partner**

I declare that I am adopting the child with my partner and I want to receive paternity leave and not adoption leave.

**You must be able to tick all three boxes below to get paternity leave**

I declare that

- I am either
  - married to the person adopting the child, or
  - living with the person adopting the child in an enduring family relationship, but not an immediate relative
- I shall have responsibility for the child's upbringing
- I shall take time off work to support the person adopting the child or care for the child

Signature of Officer  
and Date

**Manager's authorisation for paid/unpaid leave provided on next page.**

**This leave is to be paid/unpaid\* (\* Manager to delete as appropriate)**  
*An officer who is entitled to paternity leave will also be entitled to paternity pay of a maximum of 5 days paid leave in any period of 2 years.*

Signature of Manager  
and Date

This completed form to be copied to:

Pay Section  
Office of Human Resources