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| **Request for Carer’s Leave** |
| Staff Name |  |
| Job Title |  |
| Department |  |
| Date and Amount of Leave requested |  |
| **A. Declaration (please tick – you must meet this criterion to be eligible to take carer’s leave)** |
| I will be absent from work for the purpose of providing or arranging care for a dependent. |  |
| **B. Declaration (please tick one option)** |
| The dependent is my spouse, civil partner, child or parent **OR** |  |
| The dependent is a person who lives in the same household as me (other than a lodger, tenant, boarder, or employee) **OR** |  |
| The dependent is a person who reasonably relies on me to provide or arrange care. |  |
| **C. Declaration (please tick one option)** |
| The dependent for whom I requested carer’s leave has an illness or injury (whether physical or mental) that requires, or is likely to require, care for three months **OR** |  |
| The dependent for whom I request carer’s leave has a condition that amounts to a disability under the Equality Act 2010 **OR** |  |
| The dependent for whom I request carer’s leave requires care for a reason connected with their old age.  |  |
| **NOTES**You must meet the criterion under Declaration A, as well as one criterion under Declaration B and one criterion under Declaration C.Three days out of the five days available for Carer’s Leave (pro-rata for part time staff) will be paid as part of the occupational policy, the other days are unpaid. While sums payable by way of salary may cease for some of the Carer’s Leave, all other benefits will remain in place, for example, holiday benefit continues to accrue; pension contributions will continue to be paid.  |
| **Sign Off** |
| Staff signature: |
| Date: |
| Name of approving Manager: |
| Approving Manager’s signature:  |
| Day one date | Paid or unpaid |
| Day two date |  |
| Day three date |  |
| Day four date |  |
| Day five date |  |