



HR51A – Paid Primary Carer Leave Application Form

Please use *HR51- Parental Leave Application Form (Maternity/Adoption)* if applying for maternity leave or if you are a UNSW couple intending to share maternity leave.

(HR.V1.0 - 7.05.18)

Please note: you must notify your Supervisor no later than 10 weeks prior to your intended start date. Refer to the UNSW Parenting Booklet and Parental Leave Checklist for Employees for comprehensive information on parental leave <https://www.hr.unsw.edu.au/diversity/flex-work-leave/parental-leave.html>

SECTION 1 - STAFF MEMBER DETAILS

Employee No.: _____

Last Name: _____ First Name: _____

Type of Employment: Full-Time Part-Time
 Continuing Fixed Term ending _____

SECTION 2 – LEAVE ARRANGEMENTS

(Expected) Date of Birth: _____

Primary Carer Leave Start Date: _____

Primary Carer Leave End Date: _____

Type of Primary Carer Parental Leave		Comments
<i>Note: All forms of primary carer parental leave must be taken in one continuous period.</i>		
<input type="checkbox"/>	Paid Primary Carer Leave – Full Pay	
<input type="checkbox"/>	Paid Primary Carer Leave – Half Pay	
<input type="checkbox"/>	Have you taken, or do you intend on taking, Partner Leave in respect of this birth? <input type="checkbox"/> Yes <input type="checkbox"/> No Already submitted application in myUNSW? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Additional Information:

SECTION 3 - PRIMARY CARER LEAVE DECLARATION

Only Staff Members applying for Primary Carer Leave need to complete this section.

I, (write full name): _____ ,

declare the following:

1. In relation to the Primary Carer Leave sought, I will assume the role of the primary carer. I understand this means I will be the parent who principally meets the daily needs of a child (or children) born, during the hours that I would otherwise regularly work at the University in the leave period requested. During the leave requested my partner (or anyone else) will not be the primary carer and any assistance I receive from them will only be to supplement my role as the primary carer of the child (or children) born.

2. My partner: _____

is employed by: _____

and has access to paid parental leave? Yes/ No

If yes, has your partner taken, or intend to take, any partner, parental, primary carer (or similar) leave?
 Yes/ No

If yes, what period/s of paid and unpaid leave has, or will have been, taken by your partner in respect of this birth?

List all periods of any paid and unpaid leave taken on a separate line	Start date(s)	End date(s)

Total number of weeks of paid partner, parental and/or primary carer leave: _____

or

not applicable - I have no partner

is not employed - please complete Section 3(3) - 'other reasons'

3. In the entire duration period I have requested Primary Carer Leave, my partner will be:

working on a continuing (full time or part time), fixed term, casual or contractual basis and not on any paid or unpaid leave (other than partner leave around the birth of the child); or

enrolled with an officially recognised education provider (*insert provider name*):

and studying (insert course): _____

on a full time basis: Yes/ No; or

- other reasons – please specify why you will be primary carer (provide details):

- I have attached a **medical certificate** from a doctor/midwife stating the expected date of birth of the child.
- I will provide the child's **birth certificate** to my local UNSW HR representative as soon as it becomes available.
- I acknowledge and agree that UNSW may ask me to provide further evidence to show that I will be the Primary Carer of the my child during the requested leave period prior to granting paid Primary Carer leave or at any point in time.
- I confirm that I agree that UNSW's policies and procedures as updated from time to time, including but not limited to my obligations in respect of paid outside work set out in section 3 of UNSW Code of Conduct and the UNSW Paid Outside Work Policy continue to apply to my employment despite me being on parental leave.
- I confirm that the information I have provided and attached with this application is true and accurate at the time of completion. I will update UNSW if my circumstances change. I am aware that supplying false or misleading information may lead to disciplinary action and/or cancellation of approved leave.

SECTION 4 – SIGNATURE OF THE PERSON MAKING THE DECLARATION (A UNSW EMPLOYEE) AND A WITNESS

I solemnly and sincerely declare the matters set out above and I conscientiously believe those matters to be true.

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under the *Oaths Act 1900* (NSW).

The following signature needs to be made in the presence of a qualified witness.

Statutory declarations under the Oaths Act 1900 may be made before an authorised witness - usually a JP, a lawyer or a notary public.

Staff Member signature:

Place:

Date:

in the presence of an authorised witness, who states:

I, _____, a _____,
[name of authorised witness] [qualification of authorised witness]

certify the following matters concerning the making of this statutory declaration by the person who made it: *[* please select text that applies]*

- a. *I saw the face of the person **OR** *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
- b. *I have known the person for at least 12 months **OR** *I have confirmed the person's identity using an identification document and the document I relied on was

Witness signature:

Date:

Note 1 A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which can include fines or imprisonment for a maximum of 5 years — see the Oaths Act 1900.

SECTION 5 – HUMAN RESOURCES ACKNOWLEDGEMENT AND SIGNATURE

- I have reviewed this request and attachments and am satisfied the employee has demonstrated they are eligible for Primary Carer Leave.

Human Resources contact signature:

Date:

Name of Human Resources contact:

SECTION 6 - SUPERVISOR ACKNOWLEDGEMENT AND SIGNATURE

- I support this parental leave application.
- I confirm, to the best of my knowledge, the employee has supplied true and accurate information. I will update Human Resources if I believe the employee's circumstances have changed.

Supervisor signature:

Date:

Name of Supervisor:

Submit your form and attached documents to leave@unsw.edu.au (Cc your Supervisor and HR) no later than four weeks prior to your intended start date. It is strongly recommended that you discuss your intentions with your Supervisor and HR a significant period of time **prior** to doing this.
