

Unpaid Leave Request Form

**Line Manager: Please use this form to approve a request for a period of Unpaid Leave or Parental Leave.** **For further information on Parental Leave please refer to the guidance document at** <https://www.worc.ac.uk/personnel/686.htm>

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| **Employee Name:** |  | |
| **Department/School:** |  | |
| **Employee Number:** |  | |
| **Start Date of Unpaid/Parental Leave:** |  | |
| **Date of Return to Work:** |  | |
| **Unpaid Leave or Parental Leave:**  **\**Please note this may affect your pension contributions. For further queries please contact the Payroll Department. In order to purchase any lost pension please refer to the link below:*** [*https://lgpsmember.org/more/apc/lost.php*](https://lgpsmember.org/more/apc/lost.php) |  | |
| **Request Agreed:** |  | |
| **\*Days/Hours of Unpaid/Parental Leave to be deducted from salary**  ***\*Unpaid leave will be deducted from salary in the month the unpaid/parental leave was taken or the next available payroll month as applicable*** |  | |
| **I authorise the above days/hours to be deducted from my salary.**  **Print Name (Employee):**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signed (Employee)**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **Date:** \_\_\_\_\_\_\_\_\_\_ |
| **Print Name (Manager)**:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signed (Manager):**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **Date:** ­\_\_\_\_\_\_\_\_\_\_\_ |

**Line Manager: Please forward the approved request to HR Operations at** [**hr@worc.ac.uk**](mailto:hr@worc.ac.uk) **by the 10th of the month in order to meet the Payroll deadline.**