

# PARENTAL LEAVE APPLICATION FORM



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South East  
Technological  
University

SOUTH EAST TECHNOLOGICAL UNIVERSITY

NAME: \_\_\_\_\_

STAFF ID.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EMAIL: \_\_\_\_\_

## POSITION HELD:

TITLE OF POST: \_\_\_\_\_

GRADE OF POST: \_\_\_\_\_

**\*ACADEMIC STAFF MUST PROVIDE A COPY OF PRESENT TIMETABLE WITH THIS APPLICATION\***

## DETAILS OF PARENTAL LEAVE SOUGHT:

DURATION/FREQUENCY: \_\_\_\_\_

*(The leave may be taken as a **continuous block of 26 weeks (130 days)** or **by agreement with the University** may be broken up over a period of time into individual days or weeks)*

COMMENCEMENT DATE: \_\_\_\_\_

RETURN TO WORK DATE: \_\_\_\_\_

NAME OF CHILD: \_\_\_\_\_

DATE OF BIRTH OF CHILD: \_\_\_\_\_

COPY OF CHILD'S BIRTH CERTIFICATE TO BE ATTACHED

## DECLARATION OF CONSENT

I HAVE READ THE REGULATIONS OF THE DEPARTMENT OF EDUCATION AND SETU GOVERNING THE GRANTING OF PARENTAL LEAVE AND AGREE TO BE BOUND BY THEM.

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

RECOMMENDATION OF HEAD OF SCHOOL/MANAGER:

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_