

**Declaration Form to Apply for Time Off to Attend a Partner’s Antenatal Appointment**

Under current regulations the partner of a pregnant woman is entitled to unpaid time off to attend up to 2 antenatal appointments during the pregnancy. Please refer to the maternity and paternity policies for further details.

The purpose of this time off is to attend an antenatal appointment with the expectant mother which has been made on the advice of a registered medical practitioner, nurse or midwife.

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| --- | --- | --- | --- |
| Employee/Pay No. \* |  | Surname \* |  |
| Forename (s) \* |  | Division / School\* |  |
| Contact Tel No: |  | | |
| The appointment is on: (Date)\* |  | | |
| The appointment is at: (Time)\* |  | | |

I declare that I qualify for this unpaid time off through my relationship with the mother and I am the husband / civil partner / partner of that person.

|  |  |
| --- | --- |
| Signed: |  |
| Dated: |  |
| Manager name (print) and signature |  |

Please send a copy to HR Pay