

# Maternity Leave/Additional Maternity Leave Application Form – HR 108 (i)

This form is to be used by employees to apply for Maternity Leave or additional Maternity Leave. Please note: You are required to give a minimum of four weeks notice to your employer before taking Maternity Leave. Dates of Maternity Leave should be 26 weeks. Start date of Additional (unpaid) Maternity Leave must be the day after finish date of Maternity Leave. Any additional leave e.g. Bank Holidays and Annual Leave should be taken after Additional (unpaid) Maternity Leave finishes.

Please complete in Block Capitals/Tick appropriate boxes

To be completed by En	nployee																	
Surname:						First Name:												
Grade:						Personnel No:												
Location:						PPS	PPS No.											
Absence Type		Start Date											End Date					
Maternity Leave																		
Additional Maternity Leave																		
For Duration of each leave type please read appropriate HSE policy																		
Additional Information																		
Expected Date of Delivery																		
Doctor's Name:						Doctors Stamp												
Doctor's Signature:																		
<b>Note</b> : When applying for maternity leave, please ensure your GP completes the section above or attach certification from the Department of Employment Affairs and Social Protection.																		
Social Welfare																		
For staff paying Class A PRSI or Please ensure that you have made Maternity Benefit) (See Appendix 1	an applicati		he De	partme	ent of	Social	Protec	tion fo	or pay	ment	of the	appro	priate	ben	efit (M	B 1 F	Form	for
I have enclosed certification to con	firm the expe	ected o	date of	delive	ery													
I confirm that I have read and under	erstand the m	naterni	ty leav	e poli	cy and	the ex	planat	ory no	otes ir	nclud	ed in A	ppend	dix 1		1			
Signature:						Date	:											
Name:							Contact Tel No:											

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Name:	I	Personnel No:			_									
To Be Completed By Lir	ne Mana	ger												
Checklist														
All PRSI Class A Employees	I Class A Employees EDD/Placement Cert re			received							.W. 🗆			
Class D Officers		EDD/Placement Cert	received											
Average Hours worked per week			(Hours to be p	aid on	aid on Maternity Leave)									
If this employee on a fixed term or speriod of leave applied for is covered	pecified pur	pose contract please in ure of their contract	dicate if the	Yes□	No □	]								
If No please provide expiry date of c														
I have checked the relevant supporti outlined in the relevant HR policy	ing docume	ntation requires for the	leave requested	and co	onfirm th	nat this a	applica	tion con	nplies w	rith the	tern			
Signature														
Name (Capitals)	Grade													
Contact Phone No			Mobile No											
E-mail address														
Local Payroll														
Location Code														
Name:			Signature:		•		•							
Tel No	Date													
To Be Completed by Hu	man Re	sources												
System updated by:			Name:											
Tel No:			Date											
Comments:														
Circulation List														
1			5											
2			6											
3			7											
4			8											



# **Explanatory Note on Maternity Leave**

#### Maternity Leave – Entitlements

Under the Maternity Protection Acts 1994 and 2004 employees are entitled to **26 weeks maternity leave**. A pregnant employee can begin and end her maternity leave on any day she selects but must take:

- a minimum of two weeks leave before the end of the expected week of confinement
- 4 weeks leave after the end of the expected week of confinement.

An employee is also entitled to take **16 weeks' (unpaid) additional maternity leave** immediately after the end of ordinary maternity leave.

#### Maternity Leave - Notification Requirements

An employee must notify her Department Head of her intention to take maternity leave at least four weeks before the leave is due to commence.

Application for additional maternity leave should be made either at the time of the initial application or in writing not later than 4 weeks before the end of the maternity leave.

If an employee changes her mind about taking maternity leave she may revoke the notice by sending a further written notice to her Department Head.

### **Payment while on Maternity Leave**

While the maternity protection legislation does not protect the employee's entitlement to remuneration during maternity leave, the health service operates a maternity pay scheme as follows:

All employees on maternity leave are entitled to their basic pay plus normal fixed allowances less any maternity benefit to which they may be entitled on foot of their social welfare contributions. (This does <u>not</u> include additional amounts due to nightwork, overtime, shiftwork, working unsociable hours, and stand-by or on-call allowances.)

Employees are required to make the necessary claims for maternity benefit to the Department of Social Protection within the required time limits and to comply with whatever requirements are laid down by that Department as a condition of claiming benefit.

### http://www.welfare.ie/en/pdf/mb1.pdf

Employees are also obliged to do the following:

- Notify the HSE of the actual amount of Maternity benefit they are in receipt of
- Notify the HSE of any subsequent revisions to that amount.

The HSE is not liable for any loss that an employee incurs as a result of their failure to comply with the rules governing the granting of maternity benefit as set out by the Department of Social Protection.

# Travel outside of the State

As per the Department of Employment Affairs and Social Protection information on Maternity Benefit and the rules around Payment Abroad, EU citizens (and citizens of Norway, Iceland, Liechtenstein or Switzerland) can get Maternity Benefit for **any** period of their maternity leave spent in another EU country (or in Norway, Iceland, Liechtenstein or Switzerland). EU and non EU citizens can holiday abroad and get Maternity Benefit for a maximum of **6 weeks** while away. To get Maternity Benefit while abroad, you need to inform DEASP Maternity Benefit section of your intended absence.

#### **Ante-Natal and Post-Natal Medical Care**

An employee is entitled to time off work without loss of pay to attend ante-natal and post-natal **medical** visits. Time off includes the time required to travel to and from the appointment. The employee must notify her employer in writing of the date and time of the appointment as soon as is practicable and in any event **not later than two weeks** before the date of the appointment.

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# Appendix 1

# **Explanatory Note on Maternity Leave**

## **Time off for Ante-Natal Classes**

A pregnant employee is entitled to time off work without loss of pay to attend one set of ante-natal classes (except for the last 3 classes). This right to attend only one set of antenatal classes covers all an employee's pregnancies while in employment.

The employee must notify her or his employer in writing of the dates and times of these classes as soon as is practicable and in any event **not later than two weeks** before the first class. The employee is required to provide the appropriate documentation outlining the dates and time of classes.

## **Return to Work**

The employee's right to return to work is conditional on her giving notice in writing **not later than 4 weeks** before the expected return date of her intention to return to work and the expected date of return.

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