

**Confirmation or change of parental leave details  
(Second Notice)**

Name:		C Number:	
Position:			
School/Office:			
<b>Employee parental leave details</b>			
<input type="checkbox"/> I confirm there has been no change to my parental leave details (confirm dates below). OR <input type="checkbox"/> I advise that there has been a change to my parental leave details (new dates below).			
Expected date of birth/day of placement:			
<i>Period of leave</i>	Start date:	End date:	Total weeks:
<b>Spouse parental leave details</b>			
<input type="checkbox"/> I confirm there has been no change to my spouse's parental leave details (confirm dates below). OR <input type="checkbox"/> I advise that there has been a change to my spouse's parental leave details (new dates below).			
<i>Period/s of leave</i>	Start date:	End date:	Total weeks:
	Start date:	End date:	Total weeks:
<b>Additional Information</b>			
Additional comments (if any):			
Employee signature:		Date:	
<b>Employer response</b>			
<input type="checkbox"/> I note the change to the parental leave details of the employee or their spouse. OR <input type="checkbox"/> I note that there is no change to the parental leave details of the employee and/or their spouse.			
Additional comments (if any):			
Employer signature:		Date:	