YMCA NSW Parental Leave Request



Employee Name:	Today's	s Date:	Employee Payroll Number:
Manager:	YMCA	Centre:	Employment Status:
			Part Time Hours/wk.
1. YMCA Paid Parental Leave			
I wish to apply for 18 weeks YMCA paid parental leave as the Primary Carer:			
Are you eligible for the G	RPPL	What is your hourly rate?	
I wish to apply for 2 weeks YMCA paid parental leave as the Father or Partner:			
Are you eligible for the GPPL What is your hourly rate?			
Period:	//	to	/ inclusive
If approved I would like the 18 weeks paid as follows (please tick one option):			
Period:	Fortnightly at normal pay on top of the government contribution 18 weeks Government Contribution followed by 18 weeks of YMCA top up NB: The First payment of Government Contribution will cover more than one week's pay		
2. Unpaid Parental Leave			
Period:	//	to	// inclusive
Employee Sign:		[Date:
Alternate Email address:			
Approval			
YMCA Leave Approved		Yes	□No
YMCA Paid Parental Leave Approved		Yes	□No
If no, why?			
Authorised Sign:		Date:	