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| SPL Form 1A: Maternity/Adoption Leave  Curtailment Cancellation Form | | |
| **Guidance** | | |
| You should complete this form if you want to cancel the curtailment of your maternity/adoption leave and pay. You must cancel the curtailment before the date previously provided.  Please read the [Shared Parental Leave Policy](https://www.ed.ac.uk/human-resources/policies-guidance/a-to-z-of-policies-and-guidance) for more information about SPL and the terms used. | | |
| **Section 1: Personal Details (Mother/Lead Adopter)** | | |
| Name: |  | |
| Employee Number: |  | |
| **Section 2: Declaration and Signature** | | |
| I declare that:   * I have previously served notice to curtail my maternity/adoption leave and pay * I would now like to cancel that curtailment notice * I have not returned to work (other than on agreed ‘keeping in touch’ days) | | |
| Signature: | | Date: (dd/mm/yyyy) |
| **On completion attach this form to a Service Request with Interim Form Shared Parental Leave as the category within People and Money. HR will acknowledge receipt and notify your manager(s).** | | |

