



STATUTORY PREGNANCY LEAVE (17 weeks) and/or
STATUTORY PARENTAL LEAVE (35 weeks, 61 weeks or 63 weeks)
REQUEST FORM FOR OCCASIONAL TEACHERS

GENERAL INFORMATION:

This form is to be completed and signed by the employee and then forwarded to your HR Contact in the Academic Services Department for all Occasional Teachers

This application should be completed by the employee AT LEAST THIRTY DAYS PRIOR to the date when the pregnancy and/or parental leave is to commence.

Employee Name: _____ SAP Employee Number: _____

School Name: _____ Signature of Academic Services Supervisor: _____

Due Date as per Medical Certificate (PLEASE ATTACH MEDICAL CERTIFICATE) ____/____/____ Last Working Day: ____/____/____

Pregnancy Leave Dates (17 Weeks): Start: ____/____/____ End Date: ____/____/____

Please submit a copy of Birth Certificate OR a copy of Birth Registration upon receipt

Option 1: 35 Weeks

(Combined Pregnancy Leave 17 weeks & Standard Parental Leave 35 weeks = 52 week weeks/12 month)

Standard Parental Leave requested from: Start: ____/____/____ To: ____/____/____

Option 2: 61 Weeks Extended Parental Leave

(Combined Pregnancy Leave 17 weeks & Extended Parental Leave 61 weeks = 78 weeks/18 months)

Extended Parental Leave requested from: Start: ____/____/____ To: ____/____/____

Option 3: 63 Weeks (Parental Leave (Parent) or Adoption Leave = 63 weeks/14 months)

Parental Leave requested from: Start: ____/____/____ To: ____/____/____

Employee Signature

Academic Services Approval

For information pertaining to Benefits coverage, please contact OTIP at 1-866-783-6847 or by email at OECTAenrolment@otip.com