Appendix 2

Our Ref

Your Ref

Contact

Direct Dial

Direct Fax

E-Mail

Date

**PERSONAL**

(Employee Name)

(Job Title)

(Cluster)

(Function)

(Location)

Dear (Employee Name)

**PARENTAL BEREAVEMENT LEAVE AND PAY**

I acknowledge receipt of your application for Parental Bereavement Leave and Pay in accordance with the Council’s Parental Bereavement Leave and Pay guidance.

I confirm that you are granted ?? weeks Parental Bereavement Leave from your post of (*job title)* within *(Cluster/Function)* from *(date).*

You will receive your salary and other conditions of service as normal whilst you are on Parental Bereavement Leave.

Yours sincerely

**HR Service Centre**

Cc – Personal File

To insert the following wording in place of the last paragraph in the letter, in applicable cases: -

*As your contractual rate of pay is below the rate of Statutory Parental Bereavement Pay (SPBP) and you meet the qualifying conditions for SPBP, you will be paid SPBP during your period of Parental Bereavement Leave. You will receive all your other conditions of service as normal during this period.*