

# Compassionate and special leave (CSL) request form

Personal and confidential

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Circumstances under which CSL requests may be made are detailed in the [CSL procedure](https://www.luton.gov.uk/Jobs_and_careers/youandwork/Lists/LutonDocuments/leave/compassionate-and-special-leave-procedure.pdf).

Please complete all [‘about you’ fields](#_About_you_1) on page 5, then click the relevant link to go to [request-specific details and questions](#_Request-specific_questions) about the type of CSL you’re requesting.

Finally, you must [sign the declaration](#_Declarations) on page 12. Your line manager and service director also need to approve the request by completing their declarations.

Once this form is completed by all relevant parties, save a copy for your records and email it to LBC HR Services.

# Reasons for CSL requests

You must complete this form if you wish to be absent from work for:

* a bereavement
* disability leave including:
	+ disability leave
	+ cancer screening
	+ bone marrow donation
* extended leave
* family-related leave including:
	+ time off to care for a relative or a dependant
	+ fertility treatment
	+ maternity support leave
	+ urgent family leave
	+ antenatal appointments
	+ parental leave
* public duties including:
	+ governor duties
	+ magistrate / JP duties
	+ jury service
	+ election duties
	+ reservist – annual camp (unpaid)
	+ special constable (unpaid)
	+ fire fighter - retained (unpaid)
	+ other (unpaid) such as:
		- attending annual camp for organisations such as Guides, Scouts, Sea Scouts or Army Cadets
		- to participate in a national or international sporting event
* study leave
* time off for interviews

# Process for requesting and authorising CSL

1. Employee completes the request form with supporting evidence if appropriate.
2. Employee submits the form to their line manager prior to the time off / leave being required. **Note:** There are some circumstances when the form will need to be completed retrospectively. Where this is the case, the request for time off or leave should already have been agreed in principal with an appropriate person.
3. Line manager:
	1. reviews the completed application
	2. reviews the CSL procedure and makes sure employee:
		1. is eligible
		2. has submitted correct information and supporting documentation
		3. the service is not adversely effected by the request
4. Line manager signs the application form to indicate either:
	1. their support of the request
	2. the reason(s) why the request is not supported
5. Line manager submits the request to the service manager for authorisation.
6. Service manager reviews the request and records the final decision.
7. Form returned to line manager who advises employee of the decision either verbally or in writing.
8. Line manager emails the completed form and any supporting documentation to LBC HR Services. Alternatively, it can be posted to HR Services, Apex House, 30-34 Upper George Street, Luton, LU1 2RD, who will contact the line manager with any queries.
9. HR Services input the authorised leave to iTrent.
10. If any of the leave being authorised is unpaid, the form is passed to Payroll who will arrange to deduct salary.
11. HR Services or Payroll file the request form on the employee’s personnel file.

# About you

## Type of request

What type of CSL are you requesting?

Choose a request type

## Your details

**Surname:** Click or tap here to enter text

**First name:** Click or tap here to enter text

**Department:** Click or tap here to enter text

**Team/service:** Click or tap here to enter text

**Post title:** Click or tap here to enter text

**Occupancy ref. no. / Job ref. no.1:** Click or tap here to enter text

**1** This can be found on payslip in ‘position details’ box

## Date(s) requested

**From:** Click or tap to enter a date

**Full or half day:** Choose an item

**To:** Click or tap to enter a date

**Full or half day:** Choose an item

## Additional unpaid leave

**Are you requesting any additional unpaid leave?** Choose an item

If yes, please tell us the date(s) and if they of full or half days.

**From:** Click or tap to enter a date

**Full or half day:** Choose an item

**To:** Click or tap to enter a date

**Full or half day:** Choose an item

# Request-specific questions

Click the relevant link below to take you to specific details and questions about the type of CSL you’re requesting.

* [Bereavement](#_Bereavement_leave)
* [Disability leave](#_Disability_leave)
* [Extended leave](#_Extended_leave)
* [Family-related](#_Family-related)
* Parental leave
* [Public duties](#_Study_leave_and)
* [Study leave and time off for interviews](#_Study_leave_and)

# Bereavement leave

You must complete this form if you wish to be absent from work due to a bereavement. Circumstances under which other special leave requests may be made are detailed in the [CSL procedure](https://www.luton.gov.uk/Jobs_and_careers/youandwork/Lists/LutonDocuments/leave/compassionate-and-special-leave-procedure.pdf).

**Three days paid leave** can be requested on the death of a member of the immediate family:

* spouse
* partner
* parent
* child
* brother
* sister
* legal guardian

**One day of paid leave** for other members of the family can be requested to attend the funeral. This includes:

* grandparent
* grandchild
* aunt
* uncle
* niece
* nephew
* in-laws
* partner’s immediate family

All bereavement leave is pro-rated for part time workers.

**Relationship to deceased:** Choose an item

**Are you the next of kin to the deceased2?** Choose an item

**2 Two additional days paid leave** may be requested where an employee who as **next of kin** is required to make arrangements for the funeral, estate and other related tasks. This does not need to be taken consecutively or in full days.

## Date(s) requested

**From:** Click or tap to enter a date **Full or half day:** Choose an item

**To:** Click or tap to enter a date **Full or half day:** Choose an item

## Additional unpaid leave

**Are you requesting any additional unpaid leave?** Choose an item

If yes, please tell us the date(s) and if they of full or half days.

**From:** Click or tap to enter a date **Full or half day:** Choose an item

**To:** Click or tap to enter a date **Full or half day:** Choose an item

Now please [sign and complete the declaration(s)](#_Declarations).

# Disability leave

You must complete this form if you wish to take disability leave, time off for cancer screening or time off to make a bone marrow donation. Circumstances under which other special leave requests may be made are detailed in the [CSL procedure](https://www.luton.gov.uk/Jobs_and_careers/youandwork/Lists/LutonDocuments/leave/compassionate-and-special-leave-procedure.pdf).

**What are you requesting leave for?** Choose an item

**Are you requesting paid or unpaid leave?** Choose an item

## Date(s) requested3

1. **Date:** Click or tap to enter a date **Full or half day:** Choose an item
2. **Date:** Click or tap to enter a date **Full or half day:** Choose an item
3. **Date:** Click or tap to enter a date **Full or half day:** Choose an item
4. **Date:** Click or tap to enter a date **Full or half day:** Choose an item
5. **Date:** Click or tap to enter a date **Full or half day:** Choose an item

3 You’re required to attach a doctor’s or hospital appointment letter or card as proof of appointment or treatment.

**Nature of disability or treatment4:** Click or tap here to enter text

4 The ability to take disability leave follows a diagnosis of a condition that has been [identified as a disability under the Equality Act 2010](https://www.gov.uk/government/publications/equality-act-guidance). Investigatory medical appointments are not covered. Employees can only take disability leave when they are well. Disability leave is **not** a substitute for sickness absence.

**Describe the proposed treatment / assessment / rehabilitation5:** Click or tap here to enter text

**5** Disability leave is available for rehabilitation, ongoing assessment or treatment. Examples can be found in the [CSL procedure](https://www.luton.gov.uk/Jobs_and_careers/youandwork/Lists/LutonDocuments/leave/compassionate-and-special-leave-procedure.pdf).

**Please detail the dates and times of any previous disability leave granted in the current leave year6:** Click or tap here to enter text

**6** Please indicate whether it was paid or unpaid leave.

Now please [sign and complete the declaration(s)](#_Declarations).

# Extended leave

You must complete this form if you wish to be absent from work for more than 3 weeks consecutively. You must have authorisation for the extended leave before requesting the leave in the normal way (via iTrent). Circumstances under which other special leave requests may be made are detailed in the [CSL procedure](https://www.luton.gov.uk/Jobs_and_careers/youandwork/Lists/LutonDocuments/leave/compassionate-and-special-leave-procedure.pdf).

**Start date with the council7:** Click or tap to enter date

**7** Extended leave can only be requested if you have at least one year's continuous service with the council at the time of the request.

## Dates requested8

**From:** Click or tap to enter date **To:** Click or tap to enter date

8The maximum period allowed for extended leave is six weeks. Extended leave should not be taken during the main holiday periods - July, August and Christmas. Requests should be made at least six months prior to the date of commencement of such leave.

## Tell us how you plan to make up your extended leave

If you're requesting extended leave, **you should take at least three weeks from your annual leave entitlement**. The remainder may be given as unpaid leave.

You may be able, with the prior written agreement of your service director, to 'bank' annual leave from the previous annual leave year, or time-off in lieu from the preceding months. This only applies for the purpose of extended leave.

As an example, if you're requesting extended leave of 6 weeks (the maximum that can be requested), that time off can be 'made up of', for example:

* 3 weeks annual leave
* 2 days TOIL
* 2 days flexi
* the remainder unpaid leave

**List your planned time off below.**

* Annual leave: Click or tap to enter number of hours
* Flexi: Click or tap to enter number of hours
* TOIL: Click or tap to enter number of hours
* Unpaid leave: Click or tap to enter number of hours

Now please [sign and complete the declaration(s)](#_Declarations).

# Family-related

You must complete this form if you wish to be absent from work for any reasons stated below. Circumstances under which other special leave requests may be made are detailed in the [CSL procedure](https://www.luton.gov.uk/Jobs_and_careers/youandwork/Lists/LutonDocuments/leave/compassionate-and-special-leave-procedure.pdf).

**Start date with the council9:** Click or tap to enter a date.

**9** Parental leave can only be requested if you have at least one year's continuous service with the council at the time of the request.

**Why are you requesting family-related extended leave?**

[ ]  Leave to care for dependant who:

[ ]  is chronically or terminally ill

[ ]  is unexpectedly sick

[ ]  is receiving fertility treatment

[ ]  needs maternity support

[ ]  Parental leave (unpaid)

[ ]  Attending an antenatal appointment (unpaid)

[ ]  Urgent family leave (unpaid)

If your request is for time off to care for a relative or a dependant, please explain the reason for the request, your relationship to them and, if relevant, why other family members are not undertaking or helping in these tasks. Detail the dates that are being requested.

**Reason:** Click or tap to enter text

**Relationship to a relative or dependant:** Click or tap to enter text

**Date requested from:** Click or tap to enter date **Date requested to:** Click or tap to enter date

## Fertility treatment requests10

Tell us about the proposed treatment and likely date(s) and time(s) of appointment(s): Click or tap to enter text

10 Female employees may request up to a maximum of 10 days paid leave and up to 5 days paid leave for partners of women undertaking fertility treatment. Additional unpaid leave may also be requested.

## Maternity support leave11

Please detail your relationship to the mother: Click or tap to enter text

11 A nominated carer is the person nominated by the mother as their primary provider of support at or around the time of the birth. This could be:

* the baby's father
* a relative
* someone who has a caring relationship with the mother and/or the child

Before any leave is granted, a copy of the mother's certificate of expected childbirth - form MAT B1 - will be required, as will a letter from the mother outlining the reasons and circumstances why the employee is going to be the primary carer.

### Date(s) requested12

1. **Date:** Click or tap to enter a date **Full or half day:** Choose an item
2. **Date:** Click or tap to enter a date **Full or half day:** Choose an item
3. **Date:** Click or tap to enter a date **Full or half day:** Choose an item
4. **Date:** Click or tap to enter a date **Full or half day:** Choose an item
5. **Date:** Click or tap to enter a date **Full or half day:** Choose an item
6. **Date:** Click or tap to enter a date **Full or half day:** Choose an item

12 A maximum of 5 days (one working week) paid leave for maternity support can be requested as full or part days. Part timers may take the equivalent maximum of one working week.

You’ll need to send with this CSL request:

* a copy of the expectant mother’s mat B1 form
* a letter from mother explaining reasons why you’re the primary carer

## Urgent family leave13

Tell us your relationship to the dependant\*: Click or tap to enter text

Please detail the circumstances leading to an urgent leave requirement: Click or tap to enter text

13 Reasonable **unpaid** time off will be granted to help employees cope with the initial crisis and to make longer term care arrangements. This provision is for unforeseen matters.

If you know in advance that you need time off, you should ask for annual leave or flex leave in the normal way. CSL cannot be used to provide ongoing regular care for a dependant.

## Parental leave14

I’m requesting unpaid time off to attend a maximum of two antenatal appointments for a maximum of 6 and a half hours for each appointment, with either my spouse, civil partner, partner or the mother of my child.

Please complete the details requested below.

**Appointment 1:**

* Date: Click or tap to enter date
* Time: Click or tap to enter text
* Location: Click or tap to enter text

**Appointment 2:**

* Date: Click or tap to enter date
* Time: Click or tap to enter text
* Location: Click or tap to enter text

I attach in support of my request the antenatal appointment letter or card.

I am applying for **parental leave** for (name of child) and I am named on the child’s birth certificate or have parental or guardian responsibility under the law (as defined by Section 3 of the Children’s Act 1989). The parental leave is to care for the child or to make arrangements for

the good of the child. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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*For each child I may take a maximum of 4 weeks in any one 12 month period up to a maximum of 18 weeks. I must give at least 7 days notice of each request.*

I attach in support of my request for Parental Leave the birth certificate or adoption certificate. The child for whom the parental leave relates must be under 18 years of age.

# Public duties

# Evidence

Tick as required and attach relevant photocopies, scans or photos of the evidence needed to your submission email.

[ ]  As proof of **illness or treatment**, I attach doctor’s or hospital appointment letter/card(s).

[ ]  As proof of **maternity leave support**, I attach:

[ ]  form MAT B1

[ ]  letter from mother explaining reasons why I’m the primary carer

# Study leave and time off for interviews

# Declarations

## Employee declaration

You must complete this employee declaration for all request types.

I declare that:

[ ]  I will not work during any period of absence

[ ]  the information I have given is complete and accurate

[ ]  I understand that knowingly providing false information may result in disciplinary action being taken including the possibility of dismissal

**Extended leave request only:**

[ ]  I understand that I may not make a further request for extended leave in the next 3 years

[ ]  if I’m delayed in the country I am visiting for any reason in either country, such as strikes, natural disasters, mechanical faults in transport or sickness, I’m required to maintain regular communication with my manager at my own expense

[ ]  failure to return to work on the expected date will be considered a serious matter

**Employee signature\*:** Click or tap here to enter text

**\* Please note:** adding your name to this field is considered as your signature.

**Date:** Click or tap to enter date

## Line manager declaration

Line managers must complete this declaration for all request types.

**The following leave arrangements are being supported by me.**

### Paid leave

Start date: Click or tap to enter text End date: Click or tap to enter text

Total paid leave (days and hours): Click or tap here to enter text

### Unpaid leave

Start date: Click or tap to enter date End date: Click or tap to enter date

Total unpaid leave (days and hours): Click or tap to enter text

OR

**I am unable to support this request.**

Tell us your reason: Click or tap to enter text

 **Manager signature\*:** Click or tap here to enter text

**\* Please note:** adding your name to this field is considered as your signature.

**Date:** Click or tap to enter date

**Contact phone no:** Click or tap to enter date

## Service manager authorisation

Service managers must complete this declaration for all request types.

**Service manager signature\*:** Click or tap here to enter text

**\* Please note:** adding your name to this field is considered as your signature.

**Date:** Click or tap to enter date

Once this form is completed by all relevant parties, save a copy for your records and email it to LBC HR Services.

# iTrent / Payroll input

Leave details added: Signature: Click or tap here to enter text Date: Click or tap to enter date
Payroll details entered: Signature: Click or tap here to enter text Date: Click or tap to enter date