**Maternity Leave Application Form**

*For expecting mothers requesting leave before or after childbirth*

1. **Employee Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Name |  | Employee ID |  |
| Job Title |  | Department |  |
| Contact Number |  | Email Address |  |
| Supervisor/Manager |  |  |  |

1. **Leave Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Expected Date of Delivery (EDD) |  | Leave Start Date |  |
| Planned Return Date |  | Total Number of Days/Weeks Requested |  |

**C. Type of Maternity Leave Requested**

(✔ Check applicable option)

* ☐ **Prenatal Leave** (Before childbirth)
* ☐ **Postnatal Leave** (After childbirth)
* ☐ **Full Maternity Leave Period** (Before & after childbirth)
* ☐ **Extended Leave** (Specify reason): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**D. Supporting Documents**

(✔ Check enclosed documents)

* ☐ Medical Certificate / Doctor’s Note
* ☐ Expected Delivery Date Confirmation
* ☐ Other Documents (Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**E. Work Handover Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| Tasks to be handed over |  | Temporary Replacement (if any) |  |
| Handover Completed On |  |  |  |

**F. Employee Declaration**

I hereby request maternity leave as indicated above. I confirm that the information provided is accurate. I understand the company’s maternity leave policy and agree to comply with all requirements.

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**G. Supervisor/Manager Approval**

|  |  |  |
| --- | --- | --- |
| Supervisor/Manager Name |  | |
| Remarks |  | |
| Approved Leave Duration | |  |
| Signature & Date: | |  |

**H. HR Department Use Only**

|  |  |  |  |
| --- | --- | --- | --- |
| Application Received On |  | Leave Approved / Denied |  |
| Reason (if denied) |  | HR Officer Name |  |

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_