

**SCHOOL OF GRADUATE STUDIES
PARENTING LEAVE**

FIRST NAME		FAMILY NAME		STUDENT #	
PROGRAM		FULL /PART TIME		DEGREE	

EFFECTIVE DATE OF LEAVE AWAY FROM STUDIES	
START DATE (YYYY-MM-DD)	
END DATE (INCLUSIVE)(YYYY-MM-DD)	

PREGNANCY LEAVE (THIS OPTION CAN ONLY BE CLAIMED BY THE BIRTH MOTHER)	
SEE SECTION 19.03/.04/.05 OF McMASTER CUPE COLLECTIVE AGREEMENT AND 2.5.7 OF SGS CALENDAR	
START DATE (YYYY-MM-DD)	
END DATE(INCLUSIVE)(YYYY-MM-DD)	

PARENTING LEAVE (THIS OPTION IS OPEN TO ALL NEW PARENTS – BIRTH AND ADOPTIONS)	
SEE SECTION 19.03/.04/.05 OF McMASTER CUPE COLLECTIVE AGREEMENT AND 2.5.7 OF SGS CALENDAR	
STUDENT MUST COMPLETE PAGE 2 IF TAKING A PARENTING LEAVE	
START DATE (YYYY-MM-DD)	
END DATE (INCLUSIVE)(YYYY-MM-DD)	

SIGNATURE OF STUDENT	DATE (YYYY-MM-DD)

DEPARTMENTAL ACKNOWLEDGEMENT AND CONFIRMATION					
# OF T.A. HOURS COMPLETED BY STUDENT	TERM 1		TERM 2		TERM 3
SUPERVISOR	SIGNATURE		DATE (YYYY-MM-DD)		
GRADUATE ADVISOR	SIGNATURE		DATE (YYYY-MM-DD)		

A MEDICAL NOTE OR ADOPTION FORM IS REQUIRED TO ACCOMPANY THIS FORM.

****TO BE COMPLETED ONLY IF AN NSERC, SSHRC OR CIHR AWARD HOLDER ****
RULES AND CONDITIONS AND OBLIGATIONS CONCERNING THE PAID PARENTING LEAVE SUPPLEMENT (NOT REQUIRED IF STUDENT IS TAKING A PREGNANCY LEAVE)

FIRST NAME		FAMILY NAME		STUDENT #	
PLEASE INDICATE IF STUDENT IS SCHOLARSHIP HOLDER OF: NSERC SSHRC CIHR IF YOU WILL BE INTERRUPTING YOUR STUDIES/AWARD WITHIN SIX MONTHS OF A CHILD'S BIRTH OR ADOPTION IN ORDER TO BE THE PRIMARY CAREGIVER FOR THE CHILD, YOU MAY REQUEST A PAID PARENTING LEAVE SUPPLEMENT AT THE CURRENT STIPEND RATE FOR UP TO TWELVE MONTHS. PLEASE REFER TO THE TRI-AGENCY RESEARCH AWARD HOLDER'S GUIDE: http://www.nserc-crsng.gc.ca/Students-Etudiants/Guides-Guides/TriRTA-TriBFR_eng.asp#paid FORM: http://www.nserc-crsng.gc.ca/_doc/Students-Etudiants/StartDateInterruption_e.pdf PAYMENTS WILL NOT BE PROCESSED UNTIL CONFIRMATION OF APPROVAL OF LEAVE REQUEST IS RECEIVED BY MCMASTER FROM SSHRC, NSERC, OR CIHR. - I AM REQUESTING A PAID PARENTAL LEAVE SUPPLEMENT AND - I WILL BE THE PRIMARY CAREGIVER OF THE CHILD DURING THE PARENTING LEAVE - DURING THE PARENTAL LEAVE, I WILL NOT BE ENGAGED IN MY STUDIES/RESEARCH ACTIVITIES OR EMPLOYED IN ANY CAPACITY - PROOF OF BIRTH OR ADOPTION WILL BE REQUIRED BEFORE REINSTATEMENT OF THE AWARD					
STUDENT'S SIGNATURE			DATE (YYYY-MM-DD)		

****TO BE COMPLETED IF NOT AN NSERC, SSHRC OR CIHR AWARD HOLDER ****

FIRST NAME		FAMILY NAME		STUDENT #	
IF YOU ARE IN RECEIPT OF MCMASTER SCHOLARSHIP FUNDS YOU MAY BE ELIGIBLE TO RECEIVE A PARENTING GRANT TO A MAXIMUM TOTAL OF \$4000 FOR ONE TERM. BIRTH MOTHERS MAY BE ELIGIBLE FOR A SECOND INSTALLMENT OF UP TO \$4000 FOR THE SECOND TERM.					
1st TERM			2nd TERM (Birth Mothers Only)		
STUDENT'S SIGNATURE			DATE (YYYY-MM-DD)		

SCHOOL OF GRADUATE STUDIES APPROVAL/ACKNOWLEDGMENT

SIGNATURE OF ASSOCIATE DEAN		DATE (YYYY-MM-DD)	
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FOR SGS USE ONLY

PAYROLL							
# OF MONTHS REQUESTING THE PARENTING GRANT							
START DATE (YYYY-MM-DD)		END DATE (YYYY-MM-DD)		TOTAL AMOUNT		AMOUNT PER MONTH	
STUDENT RECORDS							
RECORDS UPDATED				DEPARTMENT ADVISED			