**Career Break Application Form**

**Last amended: August 2021**

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| **Full Name of Applicant** |  |
| **Job Title** |  |
| **School/Department** |  |
| **Name of Head of School/Department** |  |

Please accept this notification as my application for a career break under the terms of the Career Break Policy. My reason for applying for a career break is (***please briefly describe the reason in the box below***):

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**Supporting Information**

I attach a copy of the following documents(s) in support of my application.

(Please give details of any supporting information enclosed with this application in the box below eg details of training/education course or appropriate evidence supporting requests on personal grounds)

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**Proposed start date and duration of career break**

I have discussed my application for a career break with my Head of School/Department.

I wish to begin my career break on ……………………………….. (***insert date career break will start***) and finish my career break on ……………………………... (***insert date career break will end***).

I have read and understood the terms of the Career Break Policy. After the period of my career break, I confirm my intention to return to work with the University for a period of no less than six months. I understand that I must confirm my intention to return to work, in writing, three months in advance of the actual date of return. I understand that should I wish to resign from my employment with the University during my career break, I must give the University written notice in accordance with my contract of employment.

**Pension**

Please tick as appropriate:

□ I am not a member of any pension scheme or

I am a member of the:

□ USS □ CPAS □ CRSP □ NHS pension scheme

□ I would like (subject to scheme rules allowing this) during the career break to continue paying my employee pension contribution for the whole duration of the career break so that my membership is continuous.

□ I confirm that I do not wish to continue contributing to my pension during the unpaid career break.

­­­­­ **Annual Leave Purchase Scheme**

□ I confirm that whilst on unpaid leave, no deductions will be made and any missed payments will be collected when I return to work.

**Signed: ……………………………………………………………….. Date: ……………………………….**

**Employee Signature**

**To be completed by the Head of School/Department or designated nominee**

I confirm that the above named has discussed this application for a career break with me and that the application **does/does not** have my support. (***Please comment briefly in the box below stating the reasons for your recommendation/decision***).

During the career break, a replacement is required: **YES/NO**

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**Signed: .……………………………………………………… Date:……………………………….**

**(Head of School/Department or designated nominee)**

**To be completed by the Dean**

I confirm my approval for the above application.

**Signed: .……………………………………………………… Date: ………………………………**

**Additionally, for Academic Staff (& related staff) only:**

**To be completed by a FPVC**

I confirm my approval for the above application.

**Signed: ………………………………………………………….. Date: ……………………………..**

**(Faculty Pro-Vice-Chancellor)**

**To be completed by Human Resources**

**Signed: .……………………………………………………… Date: ………………………………**

**Please print name: ……………………………………………………………………………………………**

**□ Tick when Payroll & Pensions Administrator informed Date: ….…………………………**