

## Notification of maternity/paternity leave arrangement



- Must be submitted to the employer at the latest 8 weeks before the estimated date of delivery.
- A notification must be filled out for each employer during the 6 months preceding the child's date of birth or a confirmation of employment termination if the parent is no longer working for the employer.
- Copies of notifications must be submitted to the Maternity/Paternity Leave Fund along with applications from the Fund.

**Documents may be submitted to the e-mail address: [faedingarorlof@vmst.is](mailto:faedingarorlof@vmst.is), and by post to Fæðingarorlofssjóður Strandgötu 1, 530 Hvammstanga - or to the nearest Vinnumálastofnun office.**

<b>1. Name of applicant</b>	<b>National ID number</b>
<b>2. Name of employer</b> (company and/or self-employed)	<b>National ID number of employer</b>

<b>3. Estimated date of delivery</b> (if applicable)	<b>4. Child's date of birth</b> (if applicable)
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### 5. Percentage of employment (%) with the current employer during the six months preceding the birth of the child:

Month of birth	2nd month	3rd month	4th month	5th month	6th month
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### 6. Maternity/paternity leave:

<input type="checkbox"/> Due to birth of child	<input type="checkbox"/> Due to primary adoption	<input type="checkbox"/> Due to receipt of a child in permanent foster care
<input type="checkbox"/> Extension for multiple birth. Number of children	<input type="checkbox"/> Directly following a miscarriage after 18 weeks of pregnancy	<input type="checkbox"/> Directly following a stillbirth after 22 weeks of pregnancy

### 7. Starting date of maternity/paternity leave:

<input type="checkbox"/> Shall be the date of the child's birth	<input type="checkbox"/> Shall be the estimated date of delivery	<input type="checkbox"/> Shall be another date. From:
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### 8. Duration of maternity/paternity leave – Arrangement:

<p>a) <input type="checkbox"/> Maternity/paternity leave shall be taken in one continuous period (100% maternity/paternity leave).</p> <p>From _____ for _____ months.</p> <p style="text-align: center;"><b>OR</b></p> <p>b) <input type="checkbox"/> Maternity/paternity leave shall be distributed over a greater number of time periods or distributed over a longer period of time concurrent or without a reduced worktime ratio.</p> <p>Arrangement:</p> <p>Maternity/paternity leave must be taken for a minimum of two consecutive weeks at a time. A mother shall take maternity leave for at least the first two weeks after the birth of her child. The right to maternity/paternity leave expires when the child has reached the age of 24 months. Maternity/paternity leave can begin up to one month prior to the estimated date of delivery.</p>
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<b>9. Date and signature of applicant</b>
<b>10. Date and signature of employer</b> (if applicable)