

Application for Parental Leave at Kaiserslautern University

Last name: _____ First name(s): _____

Date of birth: _____ Student ID: _____

Degree Program: _____ Semester: _____

Location: KL PS ZW Degree: BA MA

HS-E-Mail: _____ Tel.- Nr.: _____

Name of the child: _____ Date of birth _____¹

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Declaration on Statutory Maternity Protection Periods:

I have waived the maternity protection periods or was not entitled to them.

I have taken the maternity protection periods from _____ to _____.

I hereby apply for parental leave at Kaiserslautern University of

Applied Sciences from: _____ to _____

Previously Taken Parental Leave:

None

from _____ to _____ from _____ to _____

I have read and acknowledged the "[Information Sheet on Parental Leave at HS KL.](#)" This document contains important information about studying during parental leave.

Place Date

Signature

Note:

Please send the notification along with the required documents (copy of the maternity record, birth certificate) via email to the Diversity Management Office: familienservice@hs-kl.de. The document will be forwarded to the examination office responsible for you due to the special exam-related regulations during parental leave.

The parental leave was on _____ approved not approved _____
Signature DMO

¹ Proof Required: Copy of Maternity Record or Birth Certificate