



MATERNITY AND PATERNITY POLICIES

Title:	:	Maternity and Paternity Policies
Authority	:	Registrar, Amity University Haryana
Purpose of this Policy	:	The purpose of this policy is to provide the maternity leave and benefits to the woman employees as of the Leave Regulations for the Regular Employees of the University
Date of Incorporation	:	28 Dec 2017
Date of Review	:	Once in three years. This can also be reviewed as per the requirement of the University.

SECTION 1: BACKGROUND AND PURPOSE

The Amity University Haryana is abide to provide the maternity leave and benefits to the woman employees as of the Leave Regulations for the Regular Employees of the Amity University Haryana

SECTION 2: SCOPE

The policy is applicable to all the employees of the Amity University Haryana.

SECTION 3: POLICY STATEMENT

As per the Leave Regulations for Regular Employees of the Amity University Haryana:

12. MATERNITY LEAVE

(12.1) confirmed female employees will be eligible for grant of Maternity leave.

(12.2) Maternity Leave on full pay would be admissible to female employees for a period not exceeding 90 (ninety) days from the date of its commencement, on production of requisite medical certificate. Such leave would, however, be admissible on not more than two occasions in the entire service, provided the number of surviving children does not exceed two.

(12.3) Maternity benefit is not entitled to a female employee unless she has actually worked for a period of not less than 80 (eighty) day in the immediately preceding twelve months period.

(12.4) The date of absence from work should not be a date earlier than 45 days from the date of her expected delivery.

(12.5) Maternity Leave may also be granted in case of miscarriage including abortion, subject to the condition that the total leave granted in this respect to a female employee in her career will not be more than 45 days. And the application for leave is supported by a medical certificate.

(12.6) Maternity Leave may be combined with any other kind of leave except CL, if the request is supported by a medical certificate.

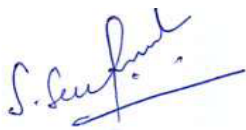
(12.7) During the period of such leave, the leave salary will be equal to the salary drawn immediately before proceeding on maternity leave.

(12.8) The eligible female employee shall apply on the prescribed form (Annexure-IV) for grant of maternity leave enclosing therewith the requisite medical certificate; and also give an undertaking that she will not work in any establishment during the period in which she receives maternity benefits. In case the female employee works in any establishment after she has been granted Maternity Leave for any period, she shall forfeit her claim to the maternity benefit.

(12.9) If the employee is entitled to benefits under the ESI Act, the leave salary will be reduced by the amount payable under the ESI Act.

SECTION 4: PROCEDURE

The employee should submit the medical documents, and doctor's certificate along with the application to the Head of the Institute or Head of the Department. The HOI or HOD will recommend the application and forward it to the HR Department for necessary formal procedures to get the approval from the Hon. Vice Chancellor. The employee has to complete the necessary HR procedures at the time of re-joining after the maternity leave.



Registrar
(Amity University Haryana)

AMITY UNIVERSITY

APPLICATION FOR MATERNITY LEAVE

Name : Department/Institution

Designation: DoJ.....

No. of Surviving Children

Expected Date of Delivery [EDD] *(Medical Certificate enclosed)*

Maternity Leave applied for: From To

(Not more than 45 days before EDD)

Other Type of leave applied for (in combination with Maternity Leave):

• Earned Leave .. From To (No. of days.....)

• Sick Leave .. From To (No. of days.....)

• Leave Without Pay .. From To (No. of days.....)

Arrangement during absence (if necessary):

Contact No. & Address during leave.....

I undertake that I will not work in any establishment during the maternity leave period or any extension thereof. If I work in any establishment, I will forfeit my claim to the entire maternity leave period.

Date:

Signature of Applicant

For Office Use

Leave due as on (date) Earned Leave days; Sick Leave days

Leave Recommended for Sanction

Maternity leave .. From To (..... days)

Earned Leave .. From To Balance days

Sick Leave .. From To Balance days

Leave without Pay .. From To (..... days)

Signature of HoD

Leave Sanctioned / Not Sanctioned

Sanctioning Authority