Date (Month-Day-Year)

Recipient

Human Resources Department

Address of your school board

Notice of leave in the event of a birth of a child

(father or other parent – five paid days)

Dear Sir or Madam:

In conformity with clause 5-13.30, this is to inform you of my absence on the occasion of a birth on the following date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attached is a medical certificate which attests that my spouse will give birth (or has given birth) on the \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Best regards,

Signature

Name

Address

c. c. : Local Union