

Notification of Keeping in Touch (KIT) Day

Employees on maternity, adoption or shared parental leave can agree arrangements for keeping in touch during their period leave. This includes, but is not limited to, completing normal duties or attending training, conference or meetings. **All boxes marked with an asterix (*) are mandatory.**

PART 1: Employee Details			
Surname: *		Forename: *	
Address: *		Email address: *	
		Tel. number: *	
		GMC number: *	
Programme: *		Grade (e.g. ST3): *	
Are you a Tier 2 visa holder? *		<input type="checkbox"/> Yes <input type="checkbox"/> No	
PART 2: Maternity/Adoption/Shared Parental Leave Details			
Start date *			
End date *			
How many KIT days have you previously taken? *			
PART 3: Keeping in Touch days			
Date of KIT day	No. of hours	Activity undertaken	
PART 4: Declaration			
a) I confirm that I attended work on the above dates in line with the LET's Parental Leave Policy and the NHS Terms and Conditions of Service Handbook. b) I confirm that, if I worked unsupervised in a clinical environment during my KIT day, that I held a valid DBS certificate. c) I agree that any statutory maternity (SMP), adoption (SAP) or Shared Parental Pay (ShPP) will be offset against any payment made for the KIT/SPLIT day.			
PART 5: Employee Declaration			
Name: *			
Signature: *			
Date: *			
PART 6: Manager Authorisation <i>(Host training organisation where the KIT day took place)</i>			
Name: *			
Signature: *			
Date: *			

Please send the completed form to your HR Officer at the Lead Employer Trust.

Lead Employer Trust use only:	
No. of KIT days taken during leave period:	Maximum of 10 days
Date payroll informed:	
Signature: *	
Date: *	



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