

MIT Graduate Student Childbirth Accommodation and Parental Leave Request Form

Use this form to request one or both of the following:

- **Childbirth Accommodation** For a student giving birth (“birth parent”); up to 2 months, beginning at birth of child. A birth parent is also eligible for Parental Leave.
- **Parental Leave** For any new parent, including birth parents; one month, to be completed within the first six months of parenthood.

Instructions: Complete and review this form with the graduate administrator in your department approximately five months prior to anticipated parenthood, and not later than two months prior to the expected start of the leave. Once reviewed by the department, submit the signed form to the Office of Graduate Education (OGE, Room 3-138) with any additional documentation:

- A birth parent anticipating the birth of a child should submit a brief statement by their medical service provider with a best estimate of the delivery date, unless this document is already on file with the OGE. If requesting both Childbirth Accommodation and Parental Leave, a birth parent may either submit a single form for both, or may submit separate requests.
- A non-birth parent anticipating the birth of a child should submit a brief statement by the birth parent’s medical service provider with a best estimate of the delivery date; the student should also certify significant responsibility for the care of the child(ren) below.
- A student adopting or fostering a child should provide evidence of adoption or foster care.
- A student who has a child placed with them pursuant to a court order should provide a copy of the court order.

Personal Information	
Name:	
MIT ID Number:	
Email Address:	
Department:	
Date of First Enrollment in Graduate Program:	
Ultimate Degree Objective:	
Estimated Date of Completion:	

Parental Status:	Birth Parent Non-birth Parent
Citizenship Status:	US Citizen/Permanent Resident International Student
Funding type and level at time of leave: (for example, 100% RA or NSF Fellowship)	

Advisors/Administrators	
Faculty Advisor:	
Graduate Administrator:	
Administrator of Graduate Student Appointments: (if different from Graduate Administrator)	

BIRTH PARENT	Childbirth Accommodation (duration of up to two months; to begin on date of birth)	
	Start Date: (estimated date of child birth)	
	End Date:	

ANY PARENT	Parental Leave Accommodation (duration of one month; to be completed within the first six months of becoming a parent)	
	Start Date:	
	End Date:	

NON-BIRTH PARENT	For reference, note the name of the birth parent, the adoption/ foster agency, or identifying information of the court order:	
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Student Signature

I certify that I will have significant responsibility for the care of my child(ren), and that all information on this form is true and complete to the best of my knowledge.

Signature of graduate student parent submitting this request

Date

DEPARTMENT/OGE OFFICE USE ONLY

Departmental Review

Signature Graduate Administrator or Graduate Officer

Date

Type name of Graduate Administrator or Graduate Officer in space provided above

OGE Approval

Signature of OGE Administrator

Date