

Standard Flexible Working Application Form

Note to the employer

This is a formal application made under the legal right to apply for flexible working and the duty on employers to consider applications seriously. You have two months within which to issue a decision, including any appeal. Please confirm receipt of this application.

Personal details

Name _____

Staff/payroll number _____

Manager _____

National Insurance No. _____

To the employer

I would like to apply to work a flexible working pattern that is different to my current working pattern under my right provided in law.

Tick as appropriate:

- I have not made two requests to work flexibly under this right during the past 12 months.
- I have made a previous request to work flexibly under this right on (date) _____

Describe your current working pattern (days/hours/times worked)

Describe the working pattern you would like to work in future (days/hours/times worked)

(you may continue on a separate sheet if necessary)

I would like this working pattern to commence from (date): _____

- Tick this box if the following applies. 'I would like the option of meeting with my chosen companion and the appropriate manager again within the next 6 months to review this change to my working arrangements.'

I understand that employees can make 2 applications for flexible working in any 12-month period.

Accommodating the new working pattern

I think my new working pattern could be accommodated by exploring the following options:

Signature _____

Date _____

Now pass this application to your employer

Employer's confirmation of receipt

(Employer to complete this section, photocopy form and return copy to employee to confirm receipt of application)

Dear _____

I confirm that I received your request to change your work pattern on (date): _____

I shall be arranging a meeting to discuss your application. In the meantime, you might want to consider whether you would like your Usdaw representative to accompany you at the meeting.

From _____