# FORM FW(A): FLEXIBLE WORKING APPLICATION FORM

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| Note to the employee You can use this form to make an application to work flexibly for any reason under the University’s procedures.  It will help your departmental administrator to consider your request if you provide as much information as you can about your desired working pattern. It is important that you complete all the questions. When completing sections 3 and 4, think about what effect your change in working pattern will have both on the work that you do and on your colleagues. At this stage, you will probably find it helpful to discuss this with your line manager. Once you have completed the form, you should forward it to your departmental administrator (you should keep a copy for your own records). Your departmental administrator will then have 28 days after the date that your application is received in which to arrange a meeting with you to discuss your request. If the request is granted, this will be a permanent change to your terms and conditions unless otherwise agreed. |

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| Note to departmental administrator This is a formal application for flexible working and there is a duty on the University to consider applications seriously. You have 28 days after the date that you received this application in which to either agree to the request or to arrange a meeting with your employee to discuss his or her request. You should confirm receipt of this application using the attached confirmation slip. |

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| **1. Personal Details**  Name: ……………………………………………………………………………….  Department: ………………………………………………………………………….  Departmental Administrator: ……………………………………………………….. |

**To the departmental administrator**

I would like to apply, under the University’s flexible working procedures, to work a flexible working pattern that is different to my current working pattern. I confirm that I meet each of the eligibility criteria:

• I have worked continuously as an employee of the University for the last 26 weeks.

• I have not made a request to work flexibly under the University’s procedures during the past 12 months.

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| **2a**. **Describe your current working pattern (days/hours/times/place you work):** |

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| **2b**. **Describe the working pattern you would like to work in future (days/hours/times/place you work):**  (you may wish to consider alternative possible flexible working options which you could negotiate with your department; continue on a separate sheet if necessary) |
| **2c**. **I would like this working pattern to commence from:**  Date: ………………………………………………………………………. |

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| **3**. **Impact of the new working pattern**  I think this change in my working pattern will affect my department and colleagues as follows: |

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| **4**. **Accommodating the new working pattern**  I think the effect on my department and colleagues can be dealt with as follows: |

**Name**………………………………………………………………………………………..

**Date** …………………………………………………………………………………………..