

## Appendix 1 Flexible Working Application Form

### 1. Personal details

Name	
Address	
Job title	
Payroll number	
Department	
Location	

2. Describe your current working pattern below, i.e. days/nights/ hours/times worked:

3. Describe the working pattern you wish to work in future below, i.e. days / nights / hours / times worked.

4. I would like this working pattern to start from:

#### **Impact of the new working pattern**

Please give details of how you think the requested work pattern will affect the department:

#### **Accommodating the new work pattern**

How do you think this can be managed/resolved?

If you are applying for a statutory right to a flexible working pattern that is different from your current working pattern you should meet the following eligibility criteria:

- I have been continuously employed by this organisation for at least 26 weeks at the date of application; and
- I have not made another application to work flexibly during the past 12 months; or
- I have made other applications to work flexibly during the past 12 months, but circumstances have changed which I have detailed above.

Applicant's signature

Date