

Flexible Working Request Form

Note to the Employee:

This form may be used to make an application for flexible working. When submitting an application, you have a responsibility to think carefully about your desired working pattern and the impacts to your team.

The Company has up to 3 months to consider any request and implement that request, so it is advisable to submit your application to your manager well in advance of the date that you wish any changes to take effect.

It will help your manager to consider your request if you provide as much information as you can about the changes that you wish to make to your working pattern. After you have completed the form please forward it to your line manager who will arrange to meet with you as soon as reasonably possible and in advance of the 3-month time limit, to discuss your request.

A further point to note, if you are requesting a 4-day week with condensed hours, your holiday entitlement will be impacted. If you are requesting a 4-day week with reduced hours, your holiday entitlement and salary will be impacted.

Note to the Manager:

This is a formal application made under the legal right to apply for flexible working.

Employers have a duty to seriously consider all applications received from eligible employees. You will need to arrange a meeting with the employee to discuss their request and conclude the process, including any appeal, within 3 months of receiving this form.

You will also need to discuss this request with the Management Team to ensure that the needs of the business are being taken into account.

Please confirm receipt of this application as soon as possible after it has been received. If you have any queries at all then please do not hesitate to contact HR.

	Personal Details
Employee Name:	Line Manager Name:
Department:	Department:
Position Title:	Position Title:

I would like to apply to work a flexible working pattern that differs from my current working pattern under my right provided by the Employment Rights Act 1996. I confirm that I meet the eligibility criteria as follows:

- I have worked continuously as an employee of Scotland Food & Drink for the last twenty-six weeks.
- I have not made a request to work flexibly under this right during the past twelve months.

Please provide the date of any previous request(s) to work flexibly under this right:		

Please describe your current working pattern (place, days, hours and times of work):
Please describe the working pattern that you would like to work in the future (place, days, hours and times) and
the date that you would like this working pattern to start from:
Please explain the reason for making your flexible working request. Please also state if your request in relation
to the Equality Act 2010, for example, as a reasonable adjustment for a disability:
to the Equality Act 2010, for example, as a reasonable adjustment for a disability.
Please describe the potential impact that any new working pattern may have. Please include details of how the
change will impact your team, the Company, the members and your workload, including your ability to carry
out your job effectively:
How might any impact that you have described be dealt with/accommodated?
Personal Details
Employee Signature: Date: