##### STATUTORY REQUEST FOR FLEXIBLE WORKING ARRANGEMENTS

Members of staff who wish to request flexibility in their working arrangements should complete this form and send it to their manager, with a copy to the [Employee Relations team](https://keeleacuk.sharepoint.com/sites/hr-intranet/SitePages/Our-People.aspx#employee-relations).

Before completing this form, you should first read the University’s *Flexible Working Policy and Procedure*. Please note that under the right it may take up to 3 months to consider a request before it can be implemented and possibly longer where difficulties arise. You should therefore ensure that you submit your application well in advance of the date you wish the request to take effect.

It will help the University 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 as otherwise your application may not be valid. In particular, you should think about what effect your change in working pattern will have both on the work that you do and on your colleagues.

1. **Personal Details**

|  |  |
| --- | --- |
| Name of employee |  |
| Job title |  |
| School/Dept |  |
| Name of manager |  |

1. **Confirmation of Eligibility Criterion**

I would like to apply for a flexible working pattern and confirm that:

|  |  |
| --- | --- |
| **Qualifying criterion** | **Tick** |
| I have not made a request for flexible working in the past 12 months |  |

1. **Please provide details of your current working pattern (days/hours/times  
    worked/location)**
2. **(a) I wish to request consideration of the following change(s) to my working arrangements:** *(Please provide full details of your request for flexible working arrangements.)*

**4(b). What date would you like this working arrangement to commence?**

**4(c). What date would you like this working arrangement to cease?** *(If applicable)*

**5. Anticipated Business Impact:**

It is important to consider the possible business implications associated with adopting flexible working arrangements.

**5(a). Please summarise how you think the change to your working pattern will affect your area of work and the wider University?**

**5(b). Please summarise how the change will impact on your colleagues/team and, if you can, suggest ways in which any negative impact on the University and on your colleagues may be addressed?**

Signed: ……………………………………….… Date: …………………………….

*Following receipt of a fully completed form, your request will be reviewed and discussed in more detail. If your request is approved, this will be a permanent change to your terms and conditions unless otherwise agreed.*