

# Confidential

**Flexible Working Request Form (FW1)**

*This form is for use when making a request for flexible working and covers both statutory and non- statutory requests.* ***Please read the University’s Flexible Working Policy and Procedures and the Flexible Working Requests Additional Guidelines before submitting your application.*** *NB: If you are a Sponsored Worker, please contact* *HRHelp@hw.ac.uk* *before making the Flexible Working Request.*

Surname: ....………………………………………. Forename(s): ...................................................................................

Job Title: .........................................................................................................................................................

School/Directorate: ........................................................................................................................................

Manager: ………………………………………………………………………………………………

**Reason for Request:** *The reason for the request will not be a factor in deciding whether or not the request is approved but will be used for equal opportunities monitoring.*

Care of Dependent(s) [ ]  Please state your relationship to the dependent…………...………..........................

Disability Adjustment [ ]  Please state the nature of your disability ………...……….....................................

Flexible Retirement [ ]  Please state your pension scheme ….................................................................

Change Management [ ]  Please state if your request is in response to Change Management/ restructure proposals ……………………………………………………………………………

Other [ ]  Please give reason for request ……………………………………………………………………….

***Note on condensed working hours***

*If your request is to move to condensed hours, your request should be discussed with an HR Consultant or HR Business Partner for advice before it is approved. The relevant named individuals can be found on the HR hub*

[*here*](https://heriotwatt.sharepoint.com/sites/hr/SitePages/Help-and-Support.aspx) *(HR Hub ‘How to access Help and Support’).*

**Current work pattern:** (days, hours, work pattern: e.g. Mon 7 hours; Tues 7 hours; Fri 7 hours total 21 hours)

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# Describe the work pattern that you would like to work in future:

(days, hours, work pattern: e.g. Mon 7 hours; Tues 7 hours; Fri 7 hours total 21 hours)

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**I would like this work pattern to start on**: Date: Click or tap to enter a date.

If you are making a **trial period** request for a **fixed term change** to your work pattern, please also confirm **how long** you wish this arrangement to be in place for: **……………………………………………........**

*NB: If you are applying for* ***Flexible Retirement*** *the above date MUST allow for the minimum notice period that your Pension Scheme requires otherwise you will be unable to access your pension. Please refer to the Flexible Working Guidance and FAQs for more details and discuss with Payroll BEFORE making a Flexible Retirement application. You should also note that from the point at which HR receive formal notification that your request has been approved, there needs to be a gap of at least 10 weeks (for USS members) or 6 weeks (for LPF members) before the new work pattern can commence.*

*\*Please indicate which statement applies*

[ ]  I would like to submit **a formal request for flexible working** as detailed above. I confirm that I meet the eligibility criteria for making a formal request and I understand that if my request is granted it will mean a **permanent change** to the terms and conditions of my employment.

If you are making a **formal request,** please answer the following 2 questions:

* Have you submitted a previous request for flexible working? YES [ ]  NO [ ]
* If YES, when did you submit your last request? Click or tap to enter a date.

OR

[ ]  I would like to submit **a fixed term change request for flexible working** as detailed above.

I confirm that I have read the University’s Flexible Working Policy and Procedures and addendum. *NB For applications related to Flexible Retirement, you are also confirming that you have consulted with Payroll)*

***Employee Name:*** …....................................................................................................................

***Employee Signature:*** …..............................................................................................................

Date: Click or tap to enter a date.

***Manager Name:*** ….....................................................................................................................

***Manager Signature:***…................................................................................................................

Date: Click or tap to enter a date.

***Additionally for condensed hours applications must be signed off by Director/Executive Dean or Equivalent i.e. member of GOE/UE***

***Director/Executive Dean Name:*** ……………………………………………………………………………………………

***Director/Executive Dean Signature:***……………………………………………………………………………………..

Date: Click or tap to enter a date.

***HR Consultant/Business Partner Name:*** ……………………………………………………………………………..

***HR Consultant/Business Partner Signature:***……………………………………………………………………….

Date: Click or tap to enter a date.

***Please ensure this form has the appropriate signatures before it is submitted via the HR helpdesk (either direct link via ERP or by emailing*** ***HRhelp@hw.ac.uk*** ***)***