**FORM FWB: STATUTORY FLEXIBLE WORKING APPLICATION ACCEPTANCE FORM**

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| **Note to the Head of Administration and Finance or equivalent**  You must write to your employee with your decision within one calendar week of the consultation meeting taking place, unless an extension to this timeline has been agreed with the employee.  Use this form when accepting an application to work flexibly, including where an alternative pattern to the one set out in the original application has been agreed.  If the employee’s working pattern cannot be changed, use form FWC: statutory flexible working application rejection form |

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| Dear [Insert name]  Following receipt of your application and our meeting on [insert date],  I have seriously considered your request for a new flexible working pattern.   |  |  | | --- | --- | | □ | I am pleased to confirm that I am able to accommodate your application. | | □ | I am unable to accommodate your original request. However, I am able to offer the alternative pattern which we discussed and which you agreed would be suitable for you. |   Your new working pattern will be as follows:    Your new working arrangement will begin from Date: …………………………….. |
| **Note to employee**  Please note that the change in your working pattern will be a permanent change to your terms and conditions of employment and you have no right in law to revert to your previous working pattern. |

If you have any questions on the information provided on this form please contact me to discuss them as soon as possible.

Name: …………………………………………………… Date: ……………………………………