FLEXIBLE WORKING APPLICATION ACCEPTANCE FORM

Note to the employer
You must write to your employee within 14 days following the meeting with your decision. This form can be completed by the employer when accepting an application to work flexibly. If you cannot accommodate the requested working pattern you may still wish to explore alternatives to find a working pattern suitable to you both. Please note that the Flexible Working Application Rejection Form should be used if the employee's working pattern cannot be changed, and no other suitable alternatives can be found.

Dear:		Staff Number:	
Following receipt of your application and our recent meeting on:		Date:	
I have 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 have discussed and you agree would be suitable to you.		
Your new working pattern will be as follows:			
Your new working arrangements will begin from:		Date:	

Note to the 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 to revert back 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:	

NOW RETURN THIS FORM TO YOUR EMPLOYEE