**FLEXIBLE WORKING REQUEST FORM**

|  |
| --- |
| Every employee has a statutory right to request flexible working. This right applies from the first day of employment. The Force is committed to providing opportunities for individuals to achieve flexibility in their working arrangements and a good balance between their working lives alongside personal responsibilities and preferences, and will consider a range of flexible working options, whilst ensuring operational resilience.Employers must agree to a flexible working request unless there is a genuine business reason not to. A decision to reject a request must be for one or more of the business reasons provided in the policy under the Employment Rights Act 1996. |

|  |  |
| --- | --- |
| Name |  |
| Collar Number  |  |
| Post Title |  |
| Department  |  |
| Line Manager Name/Collar |  |
| Please confirm your current working hours per week |  |
| Date of request  | Click or tap to enter a date. |
| Please describe the change you are applying for  | Choose an item. |
| Date on which change should become effective  | Click or tap to enter a date. |
| Please list an end date for any temporary/trial requests | Click or tap to enter a date. |
| Please list the dates on which your previous request(s) have been submitted (if applicable)  |  |
| Is this application made in relation to the Equality Act 2010 as part of request for reasonable adjustments? | Choose an item. |

|  |
| --- |
| **Requests cannot be considered without a fully completed Shift Pattern Calculator. Please ensure that you have completed and submit one with this request**  |

[Dorset - Police Officer Shift Pattern Calculator.xlsx](https://swishpnn.sharepoint.com/%3Ax%3A/r/sites/PPPBTC/Shared%20Documents/Flexible%20Working%20%26%20Retirement/Dorset%20Ancillary%20Docs/Dorset%20-%20Police%20Officer%20Shift%20Pattern%20Calculator.xlsx?d=wf1dbdbba97b741c1806ab293d3bee740&csf=1&web=1&e=I9iwgi)

[Dorset - Police Staff Shift Pattern Calculator.xlsx](https://swishpnn.sharepoint.com/%3Ax%3A/r/sites/PPPBTC/Shared%20Documents/Flexible%20Working%20%26%20Retirement/Dorset%20Ancillary%20Docs/Dorset%20-%20Police%20Staff%20Shift%20Pattern%20Calculator.xlsx?d=w42ab314521fa41049b5a8f220a1f2bd2&csf=1&web=1&e=jntNrr)

|  |
| --- |
| **FINAL DECLARATION AND RECOMMENDATIONS**  |

|  |
| --- |
| **In submitting this request you confirm the following:**1. there is a daily rest period of at least 11 hours between shifts
2. there is an uninterrupted weekly rest period of not less than 24 hours (although this can be aggregated to one uninterrupted rest period of 48 hours over a 14-day period)
3. This request is made in accordance with the [Working Time Regulations](https://www.legislation.gov.uk/uksi/1998/1833/contents/made)

  |

|  |
| --- |
| **INDIVIDUAL COMMENTS** This is an opportunity to confirm that you have discussed your request with your line manager, and any other information you wish to provide in relation to your request.  |
|  |
| **Individual Signature:** TYPE HERE | **Collar Number:**TYPE HERE | **Date:**TYPE HERE |
| **PLEASE EMAIL THIS REQUEST TO YOUR LINE MANAGER AND** **.HR OPS DORSET – ADMIN** |

|  |
| --- |
| **Note for Line Management: Please be aware that all requests should be considered and an outcome reached (including appeal where appropriate) within 8 weeks from the date that the request was first submitted to the individual’s Line Manager. Any extension required to the timeline but be agreed with the individual and confirmed in writing.****Employers must agree to a flexible working request unless there is a genuine business reason not to. A decision to reject a request must be for one or more of the business reasons provided in the policy under the Employment Rights Act 1996.** |

|  |
| --- |
|  **LINE MANAGER COMMENTS** This is an opportunity to add any further information to the comments above, and to confirm that you have discussed the contents of this request with the individual, and any other observations you may wish to note.  |
| Request Approved in principal? Choose an item. |
| Please confirm the date on which you received this request: Click or tap to enter a date. |
| Please provide any further comments or notes here:  |
| **Signature:** TYPE HERE | **Collar Number:**TYPE HERE | **Date:**TYPE HERE |
| **PLEASE EMAIL THIS REQUEST TO THE INDIVIDUAL’S SECOND LINE MANAGER, COPYING IN****.HR OPS DORSET – ADMIN** |

|  |
| --- |
| **SECOND LINE MANAGER COMMENTS** This is an opportunity to add any further information to the comments above, and to confirm that you have discussed the contents of this request with the individual, and any other observations you may wish to note. |
| Request Approved in principal? Choose an item. |
| Please confirm the date on which you received this request: Click or tap to enter a date. |
| Please provide any further comments or notes here: |
| **Signature:** TYPE HERE | **Collar Number:**TYPE HERE | **Date:**TYPE HERE |
| **PLEASE EMAIL THIS REQUEST TO THE LEGITIMACY TEAM, COPYING IN****.HR OPS DORSET – ADMIN** |

|  |
| --- |
| **LEGITIMACY TEAM APPROVAL:**  |
| Request Outcome? Choose an item. |
| Please provide any further comments or notes here: |
| **Signature:** TYPE HERE | **Collar Number:**TYPE HERE | **Date:**TYPE HERE |

|  |
| --- |
| **NOTES FOR LEGITIMACY TEAM:****If Approved – Email to** **.HR OPS DORSET – ADMIN** **for processing****If Rejected – Return Application to Line Manager**  |