

Form FW5

Request for Flexible Working Appeal Reply Form

Dear	<input type="text"/>	Staff Number:	<input type="text"/>
Following our meeting on		Date:	<input type="text"/>
<p>I have considered your appeal against the decision to refuse your application to work a flexible working pattern.</p> <p>I accept your appeal against this decision. I am therefore able to accommodate your original request to change your working pattern as follows:</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>			
Your new working arrangements will begin from:			
Date:	<input type="text"/>		

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 back to your previous working pattern

I am sorry but I must reject your appeal for the following ground(s):	
<input type="text"/>	
The ground(s) apply because	
<input type="text"/>	
Signed	<input type="text"/>
Date:	<input type="text"/>