

Form FW7

**Request for Flexible Working Notice of
Withdrawal Form**

Dear;

I wish to withdraw my application to work flexibly which I submitted to you on:

I understand that I will not be able to make another application until twelve months after the above date.

Name:

Date:

Employer's Confirmation of Withdrawal (to be completed and returned to employee)

Dear:

I can confirm that I have received notice that you wish to withdraw your application for flexible working that you submitted to me on

Date:

Under the right to apply, you will not be eligible to submit another application until twelve months after the above date.

Signed:

Date: