This form must be sent to hrhelpdesk@falkirk.gov.uk at least 6 months before the date you wish your new working arrangement to take place to allow time for your application to be considered. You should speak to your manager to let them know you have sent this form.

|  |  |
| --- | --- |
| Name:  | Employee Number:  |
| Service:  | Job Title:  |
| Email Address:  | Contact Number: |
| Manager’s Name:  | Manager’s Location:  |

**Describe your current working pattern**

Hours per week:

Working Pattern:

**Describe your requested working pattern – you must reduce your hours by 40% or reduce your grade**

Hours per week:

Working Pattern:

Do you want to stay in your current post?

Yes/ No (delete as appropriate)

Do you wish to move to a lower graded post?

Yes/No (delete as appropriate)

If you wish to change jobs, please provide details of the post/grade you wish to move to:

**Employee confirmation**

* I consider myself to be of reasonable health and fitness to carry out the duties of the post and will attend any medical examination or health related meetings required for the post
* I will provide a minimum of 4 weeks’ notice before the start date of my flexible retirement arrangements in writing to my Service Manager if I wish to withdraw the arrangements that have been agreed.
* I would like to take my pension benefits and continue in employment and apply to work under the above arrangements
* I understand that I must give my contractual notice if I wish to retire fully

I would like to start this working option from (minimum of 6 months notice):

##### Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please send your completed form to **HR Helpdesk** **hrhelpdesk@falkirk.gov.uk**

You will receive an acknowledgment once your application has been received.