# EMPLOYEE REQUEST FOR FLEXIBLE WORKING ARRANGEMENTS

This template request form is intended to assist member businesses develop their own workplace request form. The following information should be used as a guide only. Any wording changes, other than those to insert a business name, may change the context, meaning or purpose of the request form. We recommend you receive advice from the Victorian Chamber of Commerce and Industry prior to making such changes.

## Contacting the Victorian Chamber of Commerce and Industry

The Victorian Chamber’s team of experienced workplace relations advisors can assist members with a range of employment, human resources and industrial relations issues.

Our experienced workplace relations consultants can also provide assistance to both members and non-members on a range of more complex matters for a fee-for-service. The consultants can, among other things, provide training to employees, conduct investigations and provide representation at proceedings at the Fair Work Commission.

For assistance or more information, please contact the Workplace Relations Advice Line on **(03) 8662 5222**.

Disclaimer

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# EMPLOYEE REQUEST FOR FLEXIBLE WORKING ARRANGEMENTS

Date of issue:

Policy approved by:

Contact person:

|  |  |
| --- | --- |
| Employee request for flexible working arrangements | |
| Have you been with the Company for 12 months?  ❒ Yes  ❒ No | Please circle which of the following applies  You confirm that you are eligible to submit this request because you have the responsibility for the care of:  (a) employees 55 years of age or older  (b) an employee with a disability  (c) an employee who is a carer (within the meaning of the *Carer Recognition Act 2010* (Cth))  (d) an employee who has the responsibility for caring for a child who is of school age or younger  (e) an employee who is experiencing violence from a member of the employee’s family  (f) an employee with the responsibility of providing care or support to a member of the employee’s immediate family, or a member of the employee’s household, who requires care or support because the member is experiencing violence from the member’s family  (g) none of the above apply, however the employer has chosen to extend the opportunity. |
| Please circle which of the following applies  What arrangement are you seeking:  (a) return to work on a part-time basis; or  (b) flexible working arrangements.  \*[Note: if you are unable to confirm either (a) or (b) — you are not eligible to submit the request] | What is the last date the child can be enrolled for compulsory schooling: |
| Are you seeking the arrangement so you can continue to be the child’s primary care giver?  ❒ Yes  ❒ No  ❒ N/A | Have you previously submitted a request to return to work on a part-time basis?  ❒ Yes  ❒ No  ❒ N/A  If yes, please attach a copy of the request and any response from the employer. |
| If applicable — what is the date of your proposed return to work on a part-time basis? | Are you prepared to trial the arrangements on a temporary basis first so that the employer can assess your request?  ❒ Yes  ❒ No |
| What date are you proposing to return to work on a full-time basis? | Are you prepared to enter into a new employment contract which reflects any new arrangements the employer may agree to?  ❒ Yes  ❒ No |
| Have you previously submitted a request for flexible working arrangements?  ❒ Yes  ❒ No  ❒ N/A  If yes, please attach a copy of the request and any response from the employer. | If applicable — please attach a document which outlines the nature of the part-time working arrangement that you are seeking (including days, hours, times worked, effect on other staff, proposed change to your remuneration, changes to reporting arrangements etc.). |
| Please attach a document which outlines your current working arrangements (or if applicable — the arrangements that applied to you before you went on parental leave).  This should include days, hours, times worked, reporting arrangements etc. | If applicable — please attach a document which outlines the nature of the flexible working arrangement that you are seeking (including days, hours, times worked, effect on other staff, proposed change to your remuneration, changes to reporting arrangements etc). |
| Do you propose to undertake other employment while the part-time/flexible working arrangement is in place?  ❒ Yes  ❒ No  If yes — please specify the nature of the employment. |  |
| Please attach a document which identifies the impact the refusal of the application may have on you and your dependants. |  |