**STATUTORY REQUEST FOR FLEXIBLE WORKING FORM**

1. **Personal Information**

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| --- | --- |
| **Your name:** |  |
| **Your job title:** |  |
| **The school you work in or area of the Trust:** |  |

1. **About your request**

|  |  |
| --- | --- |
| **Date of this request:** |  |
| **What is your current FTE?** |  |
| **Describe your current working pattern (i.e. days / hours / times and place of work):** |  |
| **Describe your flexible working request and the working pattern you would like in the future (i.e. days / hours / times and place of work):** |  |
| **What date would you like this working pattern to commence:** |  |
| **Have you made a previous request for flexible working to GLT?** |  |
| **If yes, when was this request made?** |  |
| **Are there any other comments you would like to be considered?** |  |

1. **Form submission**

Please submit this form to your Headteacher or senior manager if you work within the wider Trust, and please copy it to HR@girlslearningtrust.org

Following receipt of this form, you will be invited to a meeting to discuss the request further.