



Request for flexible working arrangements

Are you eligible for the right to request flexible working arrangements?

If you care for someone and have worked for your employer for 6 months or more, chances are that you will be eligible for the right to request flexible working arrangements.

To make certain you are eligible, it's best to check out the Department of Labour's guidelines at www.dol.govt.nz/worklife/flexible/act.

How to apply

Once you've confirmed that you're eligible, requesting flexible working arrangements is straightforward. You can use this form to make your request.

The more information you give, the easier it will be for your employer to make a decision about your request.

Make sure that you complete all the sections of the request form, including the sections that tell your employer:

- How the flexible working arrangement will enable you to provide better care for the person concerned.
- What effect your new working arrangement will have on your employer and colleagues.
- How the effects on your employer and colleagues could be dealt with.

Apply well in advance

Your employer has 3 months to deal with your request, but it could take longer if difficulties arise. So make sure you:

- Apply well in advance,
- Submit your request as soon as it's complete,
- Keep a copy of your request and note when you submitted it.

(Type/write your name and address)

To (Use either your employer's first name or surname) (Include full name and address)

I would like to request a variation to my current working arrangements under Part 6AA of the Employment Relations Act 2000. I confirm that I meet the eligibility criteria as follows:

- I have the care of a person, and
- I have been employed by this business for the last 6 months, and
- I have not made a request to work flexibly under Part 6AA during the past 12 months.

Date of any previous request to work flexibly under this right: (If applicable)



My current working arrangement is:

Place of work: *(Give full street address)*

Days and hours of work:

Example: Monday to Friday 8.00am to 5.00pm

The working arrangement I would like to have in the future is:

Place of work: *(Give full street address)*

Days and hours of work:

Example: Monday and Tuesday 8.00am to 1.00pm, Wednesday to Friday 8.00am to 5.00pm

I would like the new working arrangement to be permanent and commence from:

Example: Monday 1 September 2008

OR

I would like the new working arrangement to be temporary commencing from: *Example: Monday 1 September*

and ending on: *Example: Friday 31 October*

The new working arrangement will enable me to provide better care for the person concerned

because: *Example: I will be able to take care of my mother on Monday and Tuesday afternoons to give her regular caregiver a break.*

The new working arrangement will affect my employer and colleagues in the following way:

Example: I will not be able to work with James on Monday afternoon as I do now.

I think the effect on my employer and colleagues can be dealt with by:

Example: James and I could work together on either Thursday or Friday afternoon.

Personal details

Name:

Staff or payroll number:

Manager:

Signed:

Date:

Note to your employer

This is a request for flexible working arrangements made under Part 6AA of the Employment Relations Act 2000. You must deal with this request within 3 months of the date you received it.

You can confirm receipt of this request using the attached confirmation slip.

Forms and guidelines for responding to this request can be found at www.dol.govt.nz/worklife/flexible/act.

Return this form to your employee to confirm your receipt of their request.

Employer's confirmation of receipt (to be completed and returned to employee)

To:

I confirm that I received your request to change your working arrangement on:

Signed:

Date:

You will receive a response to this request within 3 months.

NOW ATTACH THIS COVERING NOTE TO THE REQUEST FORM AND PASS TO YOUR EMPLOYER