**Template for Employee to Submit a Formal FWA Request**

An employee can use this template to make a formal written FWA request to his/her employer under the Tripartite Guidelines on Flexible Work Arrangement Requests, if the employer does not have their own form or process for FWA requests.

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To:** *<Insert your employer’s name>*

**I would like to request a variation to my current working arrangements.**

Current work arrangement

|  |  |
| --- | --- |
| **Working days:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Working location:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Starting time of work:** \_\_\_\_\_\_\_\_\_\_\_\_\_ | **Ending time of work:** \_\_\_\_\_\_\_\_\_\_\_\_\_ |

Requested flexible work arrangement (FWA)

|  |  |
| --- | --- |
| **Working days:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Working location:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Starting time of work:** \_\_\_\_\_\_\_\_\_\_\_\_\_ | **Ending time of work:** \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Frequency of FWA:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

**Details on requested FWA:** *<Use this field if you need more space to elaborate on the requested FWA or if the requested FWA is not related to a change in time or location of work>*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Start date of FWA:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**End date of FWA:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason(s) for request:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I would appreciate your decision on this request within 2 months of the date of this request as per the Tripartite Guidelines on Flexible Work Arrangement Requests. You can find more information about the steps you need to take to respond to my request on TAFEP’s page at www.tafep.sg.

I am happy to discuss this request at a time that is convenient and I am also willing to work with you to make sure that this arrangement works effectively for both the organisation and me.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name and Signature of Employee | Date |