|  |  |
| --- | --- |
|  | <<Department>> |
|  | <<Address 1>> |
|  | <<Address 2>> |
|  | <<Address 3>> |
|  | <<Postcode>> |
|  |  |
| Private and Confidential | Direct Line: |  |
| <<Employee Name>> | Fax: |  |
| <<Address 1>> |  |  |
| <<Address 2>> | Date: |  |
| <<Address 3>> | Your ref: |  |
| <<Postcode>> | Our ref: |  |

Dear **<<INSERT NAME>>**

**Confirmation that a Flexible Working application has been unsuccessful**

Following our meeting on **<<DATE>** at which we discussed your application for flexible working, I have now considered your application and regret that I am unable to accommodate your request for the following service/operational reason(s):

**<<List reasons>>**

This (these) reason(s) apply in the circumstances because:

**<<List circumstances as appropriate>>**

**[The line manager should also explain here why any other patterns that may have been discussed at the meeting were appropriate.]**

You have a right of appeal against this decision by completing the attached

Flexible Working Appeal Form, clearly stating your grounds of appeal and

sending this to <<NAME, Head of People and Change via <<email address>> or postal address of Department of Human Resources and Organisational Development, Level 2, West Glasgow ACH, Dalnair Street, Glasgow G3 8SJ. You must submit your appeal within 2 weeks of receipt of this letter.

Receipt of your Appeal Form will be acknowledged in writing and a hearing to consider your appeal will be held within two weeks of the receipt of the form.

You will be notified of the outcome of your appeal within two weeks of the

hearing.

Yours sincerely

**<<MANAGER NAME>>**

**<<JOB TITLE>>**

**<<SERVICE AREA>>**

Enc. Flexible Working Appeal Form