

Application for Flexible Work Arrangement		
Employee name		
Position title		
Department		
Supervisor/Manager		
Date		
Flexible Arrangement Details		
Description of flexible arrangement including proposed dates		
Purpose of the flexible arrangement		
Are you requesting a leave or reduction in hours with salary continuance?	Yes	No
If the answer to the above question is yes, how is the salary continuance being funded? (e.g. vacation leave, pro-rated leave, etc.)		
Is the flexible arrangement to bridge you to retirement?	Yes	No
If the answer to the above question is yes, what is your proposed retirement date? (Please note, if the flexible arrangement is to bridge you to retirement, your retirement date will be considered irrevocable).		
Emergency contact information (Name, phone number)		
Signatures		
Signature of Applicant		
Date		
Signature of Supervisor/Manager		
Date		