

Remote Work Request

Employees must discuss their request with their immediate supervisor and then complete this form. The request must be approved by the direct supervisor and President or designee prior to submission to the Director of Human Resources. Except, if the request is made as reasonable accommodation for a disability, please contact the Director of Human Resources immediately. Please review the Remote Work Procedure prior to submitting a request.

Employee and Location Information

Name: _____ Employee ID: _____

Department: _____ Job Title: _____

Flexplace Location and Address (if appropriate): _____ Email: _____

_____ Phone Number: _____

Requested Remote Work Date Range: _____

Requested Remote Schedule

| Day of Week | Monday | Tuesday | Wednesday | Thursday | Friday |
|----------------|--------|---------|-----------|----------|--------|
| Beginning Time | | | | | |
| Ending Time | | | | | |
| Location | | | | | |

Preferred start date: _____

Confirmation and Understandings

- I understand that I may be required to be in the office (e.g. in-person meetings) on occasion.
- I confirm that I have all of the necessary resources available and know how to use them at my flexplace location to successfully perform my College position's work duties. I have the following at my flexplace location:
 - Computer
 - Software – VPN connectivity and Microsoft Teams
 - Reliable internet access
 - Telephony access (cell phone, video calls, etc.)

- I confirm that my remote work environment (noise distractions, privacy, etc.) will allow me to meet the requirements of my work duties.
- I agree to stay current on department and work group events and to facilitate communication with customers and co-workers who may need to interact with me while working remotely. For example:
 - I agree to keep my supervisor informed of progress on assignments worked on remotely and any problems encountered while working remotely.
 - I agree to structure my time to ensure attendance at required meetings as designated by my supervisor.
- College-owned resources may only be used for College business. I am responsible for ensuring that all items that I bring to my remote work location are properly used.
 - I agree to take reasonable steps to protect College property from theft, damage, or misuse. This includes maintaining data security and record confidentiality to the same standard as when working at the regular College worksite. I will comply with all licensing agreements for the installation and use of College-owned software, including software installation on multiple computers. Depending on the circumstances, I may be responsible for any damage to or loss of College property.
 - I am responsible for maintenance and repair of all personal equipment, software, data, supplies, and furniture used unless I make other arrangements in advance and in writing with my supervisor. The College assumes no responsibility for any damage to, wear of, or loss of my personal property.
- Additional costs incurred due to a flexible work arrangement will be at my expense, which may include a larger or additional monitor, keyboard, mouse, carry case, internet, incidental cell phone costs, etc., unless otherwise required by law.
- I am responsible for ensuring that the alternate worksite is safe and ergonomically suitable.
- I am responsible for any residential insurance and utility costs incurred.
- In case of injury, theft, loss or other liability, I must allow agents of the College to investigate and/or inspect the remote worksite. The College will provide reasonable notice of inspection and/or investigation.

I understand and will abide by the following:

- This remote work arrangement does not provide any contractual rights to continued employment. It does not alter or supersede the terms of the existing employment relationship. I remain obligated to comply with all College rules, policies, practices, and instructions.
- Requests to work overtime or use accrued leave are subject to supervisor approval.
- The decision to approve a remote work arrangement is at the discretion of my supervisor/manager, the Human Resources Director, and the College President or designee.
- Approval and use of a remote work arrangement is temporary and is a privilege, not a right or requirement. The arrangement is subject to periodic review (at least once per month), and my supervisor/manager reserves the right to revoke the arrangement if my job performance is adversely affected, the needs of the department/office are not being met, my job description/duties change, or business needs change.

- Job-related incidents or accidents that occur during remote work are to be reported immediately to my supervisor. I am required to follow all other College policies and procedures related to reporting a work-related injury/accident. The College does not assume responsibility for injury to any person at the remote work location.

By signing this form, I confirm that I have reviewed, understand, and agree to abide by its terms and applicable College and department policy and provisions, which include but are not limited to the topics covered in this form. I understand that any approval of a remote work request is subject to revocation at any time for any reason, including failure to abide by the above terms.

Employee Signature Date

Supervisor Signature Date

Remote Work Arrangement Approved to Begin on and End on*: _____
(*to be completed by supervisor upon signing the form)

Executive Level Signature Date

President or Designee Signature Date

Human Resources Director Signature Date