



## TELECOMMUTING WORK AGREEMENT

\_\_\_\_\_  
Office/Division

The following constitutes an agreement on the terms and conditions of telecommuting between:

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Employee

### Section A. Employee Information

Name of Employee: \_\_\_\_\_

Current Title: \_\_\_\_\_ Name of Department: \_\_\_\_\_

Name/title of direct supervisor: \_\_\_\_\_

Name of human resource contact: \_\_\_\_\_

### Section B. Alternate Work Location

Home \_\_\_\_\_  
(Address)

Other \_\_\_\_\_  
(Address)

Youth Services assumes no liability for injuries occurring in the employee's home workspace outside of work hours.

### Section C. Communication

Phone where you can be reached: \_\_\_\_\_

How will incoming calls be addressed?

- Call forwarding to above phone number
- Retrieving messages through voice mail
- Designation of receptionist or co-worker to take and route calls to you

### Section D. Network Access

Do you have the following available to you at the alternate work location?

- Computer
- High speed network with internet access

### Section E. State-owned Equipment

	Equipment Description	Date of Issue	Property Tag Number
1.	_____	_____	_____
2.	_____	_____	_____

- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

**Justification for State-owned Equipment**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

State owned equipment shall be used only for state purposes and employees are responsible for protecting state-owned equipment from theft, damage, and unauthorized use.

**Section F. Work Schedule / Hours / Time Sheets**

Regular telecommuting work hours agreed to (e.g. hours that on-site staff know they would be able to get hold of telecommuter on a regular basis):

Monday \_\_\_\_\_ to \_\_\_\_\_

Tuesday \_\_\_\_\_ to \_\_\_\_\_

Wednesday \_\_\_\_\_ to \_\_\_\_\_

Thursday \_\_\_\_\_ to \_\_\_\_\_

Friday \_\_\_\_\_ to \_\_\_\_\_

Time Sheets shall be completed for each pay period and submitted either electronically or in hard copy, as outlined in each case-by-case Work Agreement, by the last day of the pay period.

The attached Time Sheet [A.2.51(b)] shall be used to document daily task and work hours.

**Section G. Work Assignments**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I have read and understand both the telecommuting policy and this agreement and agree to abide by these terms and conditions. I agree that the sole purpose of this agreement is to define the telecommuting rules and that it does not constitute an employee contract.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Unit Head

\_\_\_\_\_  
Date

\_\_\_\_\_  
Regional Director Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Deputy Secretary Signature

\_\_\_\_\_  
Date