



# Telecommuting Agreement

Employee Name			Telecommuting BEGIN	Telecommuting END	The employee will telecommute  days per week
First	Last	MI			
Employee Department					

Employee will work at this location (address and phone number)

Describe how telecommuting will assist the employee in meeting the goals and needs of his/her work unit and the department and benefit the University of Georgia. Please attach an additional blank piece of paper if you run out of space on this form.

●●● The following conditions for telecommuting have been agreed upon by the employee and his/her supervisor ●●●

A complete work schedule is required. (Please use an "x" to identify which days the employee will work either at the University of Georgia or at the alternate site.) The employee must be available between the hours of 8:00 am and 5:00 pm unless otherwise specified on this form.



	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
UGA							
Alternative site							

Identify all of the types of personal information an employee will have access to and please explain how each of them will be protected and safeguarded while telecommuting.

The employer will furnish the following equipment to be used by the employee in the remote work location (e.g., laptop, printer):

Additional conditions:

Please list assignments or duties to be completed by the employee at the alternate location with expected delivery dates, where applicable.

Does the amount of work to be completed at the alternate location match the amount of time assigned to the employee's position? How will management validate that work is being accomplished?

## Conditions of Employment for Telecommuters

1. The telecommuter must have a formal work schedule established defining standard hours of work in which the employee's duties and responsibilities are performed.
2. The telecommuter must agree to attend in-department meetings as called by management, or regularly scheduled communications by telephone and/or email.
3. The telecommuter understands that, if he/she changes positions or is reallocated, it does not necessarily mean that he or she may continue to work at home.
4. The telecommuter understands the alternative work arrangement can be changed or ended at any time by the supervisor regardless of the reason (with or without cause; with or without reason). The telecommuter can also request to end the alternative work site arrangement. Telecommuting agreements shall not exceed one year in duration.
  - a. Under most circumstances, a reasonable notice period, no less than two weeks, should be provided.
  - b. Notification of the decision to end the alternate location work arrangement will be conveyed verbally and in writing to the telecommuter (employee).
5. Management reserves the right to visit the employee's alternate work site during business hours (normally 8 a.m. to 5 p.m. Monday through Friday unless otherwise stipulated). Managers and supervisors must have the employee's permission to enter the employee's alternate work site if the work site is private property.
6. Management reserves the right to remove any University-owned equipment, materials, working papers, official or working documents from the alternate work site. This includes computer hardware and software which is the property of the University of Georgia. University equipment used in an alternate work situation must be signed for by the telecommuter.
7. Management reserves the right to change Conditions of Employment at any time.
8. Responsibilities of Department Managers and Supervisors:
  - a. Management must establish a communication plan with the telecommuter. This plan must include periodic scheduling of supervisor-employee meetings, attendance of the telecommuter at regular employer-sponsored staff meetings, notification of office events, notification of University events, and periodic performance reviews. In situations where the telecommuter is not able to reasonably attend meetings due to geography, then management will schedule a periodic/regular schedule of telephonic or email communication. A work plan should be developed by management with the telecommuter.
  - b. Management may inspect the alternate work site to ensure that it is suitable for executing the duties and responsibilities of the assigned position. Periodic inspections of the alternate work site may be conducted to ensure that guidelines are being followed and any University equipment being used is being properly maintained. If geography does not permit an inspection, then management should discuss with the telecommuter where he/she will be working in the alternate site.

### Responsibilities of the Telecommuter:

- a. The telecommuter must submit his or her hours worked and must request vacation and sick leave as defined by the management and the University's policies and procedures. The employee is responsible for notifying the supervisor if there is a need to take sick or annual leave.
- b. The telecommuter agrees to assume complete responsibility for safeguarding all University-owned equipment to include computer hardware/software, transcription equipment, etc., which is provided for the work site.
- c. The telecommuter agrees not to allow and is responsible for safeguarding against use of any University-owned equipment by non-University employees or other unauthorized individuals. The telecommuter agrees not to use or allow use of any University-owned equipment, to include computer hardware/software, transcription equipment, etc., for non-University use. Non-University use includes employees or persons holding non-University jobs, independent contractor work, etc. The employee agrees to pay for repairs caused by external factors not work related.
- d. The employee is responsible for maintaining confidentiality and security at the alternate workplace, as the employee would at the primary work place. The employee must protect the security and integrity of data, information, paper files, and access to agency computer systems.
- e. The telecommuter must, as a pre-condition to working at an alternative site, set up an appropriate, dedicated work environment.
- f. The telecommuter must sign the "Telecommuting Agreement" form.
- g. The employee understands that all applicable Board of Regents and University of Georgia Policies and Procedures apply to the telecommuter and are subject to change by the employer.

**\*\*Certifications\*\***

I understand this telecommuting assignment is not an employment contract and may not be construed as such. I understand this work arrangement does not in any way release me from adherence with the University of Georgia and the Board of Regent policies or procedures. I also understand the telecommuting work assignment can be terminated at any time without notice. I certify that I have read, understand, and agree to comply with the terms/conditions of The University of Georgia Telecommuting Guidelines and the specific terms/conditions of this assignment.

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Employee name	Employee signature	Date signed
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Unit head name	Unit head signature	Date signed
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Unit head e-mail	Unit head phone number	
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CPH Dean name	CPH Dean signature	Date signed
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Human Resources Division staff name	Human Resources Division staff signature	Date signed
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