



COVID-19 Telework Plan, Acknowledgement and Approval Form

This telework plan ("Plan") pertains to an alternate work site request made by _____ ("Employee") and approved by the _____ ("Department") and establishes the parameters of the telework arrangement. This arrangement is solely related to COVID-19 Emergency ("Emergency") purposes.

This Plan and its approval are not precedential and do not obligate management to approve any future remote work. It is limited to the Emergency and shall terminate at the end of the Emergency or as provided in paragraph 2 below. Per the COVID-19 Telework Guidelines all university rules, policies, and procedures applicable to the Employee at the regular work site shall continue to apply in the telework arrangement.

Under this Plan, the Employee has the responsibility to read and comply with the COVID-19 Telework Guidelines and all University safety and information security policies and procedures. The University will provide the Employee with the applicable guidelines and safety and information security policies and procedures via either paper copies of the guidelines, policies and procedures or by providing information to the Employee on how to access the information online. Should the Employee have any questions of the guidelines, policies, or procedures, the Employee is responsible for bringing to the attention of the University approver below any questions so that they may be appropriately addressed.

1. The established telework days are:

☐Monday ☐Tuesday ☐Wednesday ☐Thursday ☐Friday

2. The telework arrangement will begin on _____ and continue until _____, or until ended in writing by the Employee (the Employee shall provide the written notice to the University approver of the Plan) or by the Department. The Plan may also terminate when the Emergency ends.

3. The alternative work site address is: _____

4. The Department will furnish the following equipment/supplies, and they will be returned to the Department within _____ business days of the conclusion of this Plan.

5. The duties and assignments that are authorized to be performed at the alternate site are:

6. The following methods and frequency of communication are as follows:



ACKNOWLEDGEMENT AND APPROVAL

Acknowledgement

By my signature I acknowledge that I requested a telework arrangement and that I have read this approved Plan and that it is subject to the parameters and conditions stated and further acknowledge that I have been supplied with the COVID-19 Telework Guidelines and applicable guidelines and safety and information security policies and procedures either in paper copy form or by information describing online access, and I further acknowledge that the University approver has reviewed the Plan with me and provided me with the opportunity to bring to the attention of the University approver questions, if any, that I may have concerning this Plan and the approved telework arrangement, as well as, the supplied COVID-19 Telework Guidelines and other applicable guidelines and safety and information security policies and procedures.

Employee Signature

Date

Acknowledgement and Approval

By my signature I acknowledge that I have reviewed this Plan with the Employee and have given it my approval.

For the University

Approver Signature

Date