Flexible Work Arrangement Agreement

This document is intended to ensure that both the supervisor and employee have a clear, shared understanding of the employee's flexible work arrangement. Each flexible work arrangement is unique depending on the needs of the position, supervisor, and employee. This template can be adapted to departmental requirements as necessary.

This Flexible Work Arrangement is not a contract of employment and does not provide any contractual rights to continued employment. It does not alter or supersede the terms of the existing employment relationship.

Prior to establishing the Flexible Work Arrangement Agreement, employees are required to review the Flexible Work Arrangement Policy, as well as familiarize themselves with the following University Policies:

- Flexible Work Arrangement Policy
- No:ISO:2013:01 Acceptable Use Policy
- No:OED:2011:03 Disruptive Behavior and Workplace Violence Policy

Additional resources include, but are not limited to:

- Human Resources Guidance for Effective Telework
- Human Resources Manager's Toolkit

Flexible Work Arrangement Request

☐ NEW request	☐ Renewal or extension request
☐ Change request	☐ Terminate participation

Type of Flexible Work Arrangement

☐ Flexible Work Schedule ☐ Hybrid ☐ Remote (requires HR approval)

If telecommuting, identify alternate workplace: _____

Section I - Employee Information

Employee Name: _____ Banner ID: _____

Title: _____

Union Affiliation: Y ☐ N☐ if yes, please indicate which one: _____

Department: _____ Campus: _____

Supervisor: _____

Arrangement requested by: Employer ☐ Employee ☐

Duration (maximum of one year) Begin Date: _____ End Date: _____

Section II – Supervisor Survey

Job Duties can be performed fully or partially remotely	☐ Y ☐ N
Supervisor has discussed with the employee what job duties are to be performed remotely and planned for any duties that must be performed on site	☐ Y ☐ N
Employee has appropriate remote space, equipment, and telephone and internet access.	☐ Y ☐ N
Employee can ensure that remote work will not create an information security risk	☐ Y ☐ N
Employee has demonstrated basic necessary job performance	☐ Y ☐ N
Supervisor can provide adequate supervision and accountability for the remote work	☐ Y ☐ N

Section III – Safety Checklist

the following safety features must be verified by employee at remote workplace listed above:

Temperature, ventilation, lighting, and noise levels are adequate for maintaining a work location	☐ Y ☐ N
Electrical equipment is free of recognized hazards that could cause physical harm and electrical system allows for grounding of electrical equipment	☐ Y ☐ N
Remote workplace is free of any obstructions that could restrict visibility and movement	☐ Y ☐ N

Job Duties

The general expectation for a flexible work arrangement, and particularly telecommuting, is that the employee will effectively accomplish their regular job duties, regardless of specific hours or work location, unless otherwise indicated below. Employee will notify their supervisor immediately if their alternate workplace location changes and they are no longer able to fulfill their duties as expected.

Work Schedule and Location(s)

Day of Week	Work Hours	Remote/In-Person	Location
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

☐ Rotating Remote Work Schedule

Contingency Plan

It is recommended a contingency plan be discussed as part of the Agreement process. If there is an established plan, outline the details in the space below.

Include: Onsite back-up, response time, deliverables, meeting schedules.

Equipment and Technology Access

In accordance with IRT policy, rowan issued desktops, printers and scanners must remain on campus. IRT is not responsible for assisting in the setup of monitors, keyboards and mice that are taken home. Specify any equipment or technology access the employee will need to telework and whether it will be employee or employer provided. In the event of equipment failure or service interruption, please contact the Rowan Technology Support Center to troubleshoot accordingly. If the issue cannot be resolved, the employee must notify their supervisor immediately to discuss alternate assignments or other options that could include reporting for in-person work.

What Rowan-owned technology will be used at the telework location?

*If Rowan-owned equipment will be utilized off-campus, a copy of this form must be sent to IRT by emailing support@rowan.edu

Additional Details

Use this section to capture any details or information agreed to between supervisor and employee, which may not be covered in other sections of the Agreement.

Curtailment of the Arrangement

The employee may terminate participation in the Flexible Work Arrangement Program. The university reserves the right to terminate or adjust the Flexible Work Arrangement or workplace schedule at any time in accordance with collective bargaining agreements. The employee agrees to limit performance of officially assigned duties to the official work location or to the approved remote work location. Failure to comply with this provision may result in termination of the Flexible Work Arrangement and/or other appropriate disciplinary action.

Policy and Procedure Acknowledgment

I have read and understand the Flexible Work Arrangement Policy, and agree to the duties, obligations, responsibilities and condition set forth therein.

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Dean or Division Leader: _____ Date: _____

Please forward completed form to Human Resources hr@rowan.edu for final review and processing. Changes must also be submitted to Human Resources.

☐ Approved ☐ Denied

_____ _____

Human Resources Date