UC ANR FLEXIBLE WORK AGREEMENT

UC ANR is dedicated to providing employees appropriate resources to foster a flexible work environment. Fostering a collaborative, successful flexible work environments requires intentional effort by both employees and managers. Flexible work agreements are subject to ongoing review by managers and employees and may be modified or rescinded with reasonable notice (30 days notice is typical, however urgent circumstances may arise). Flexible work agreements must serve the best interests of UC ANR's operational and business needs.

Employee & Position Information

Name Title

Position Type FLSA Status

Department Supervisor

Flexible Work Arrangement

Flexible Work Arrangement Type Hybrid Agreement Description:

Days of the Week/Hours of Work On Site:

Days of the Week/Hours of Work from Alt Site:

Alternate Workplace Location:

*Non-Exempt employees must record actual time agreed upon to work.

Communication

The following methods and times of communicating are agreed upon:

Specify who to contact, when, how often, during what time frames, and how communication will occur

Employee Acknowledgements

GENERAL

I recognize that my supervisor will assign work as necessary based on business needs regardless of work location.

I understand overtime hours for non-exempt employees must be approved in advance by the supervisor.

I agree to remain accessible during designated work hours.

I understand that my personal vehicle will not be used for University business unless authorized.

I understand that I am responsible for income, state or local tax consequences, if any, of this arrangement.

I understand that UC ANR is not obligated to approve a a telecommuting work agreement for every employee.

I have read the UC ANR Flexible Work Guidelines and understand it's contents.

I have discussed my situation with my supervisor and understand ongoing expectations of my performance.

I understand that this agreement may be altered or rescinded by either me or UC ANR at any time.

EQUIPMENT/RECORDS

I agree to use University-owned records, and materials for purposes of University business only.

I agree to report to my supervisor instances of loss, damage, or unauthorized access at the earliest opportunity.

I agree to protect and safeguard University data and information

I agree to return University equipment, records and materials within 14 days of termination of this agreement.

I understand that all equipment, records and materials provided by the University shall remain the property of UC.

I understand that UC ANR will only provide one workstation set-up plus limited peripherals.

SAFE WORKING ENVIRONMENT

I agree to maintain a safe and secure work environment.

I understand I am responsible for arranging the off-site workspace in an ergonomically sound manner.

I agree to allow the University access to assess safety and security, upon reasonable notice.

I agree to report any work-related injuries to the supervisor at the earliest opportunity.

I agree to hold the University harmless for injury to others at the alternate workplace.

Inventory

Include an inventoried list of all University equipment to be used at remote workplace including serial numbers or other identifying characteristics (e.g. model numbers).

I will need additional equipment for my remote workstation: If yes, please note equipment being requested (subject to approval):

I have requested an ergonomic evaluation for equipment not currently on the list above: Please provide further information:

Agreement		
This agreement begins on	and ends on	
Employee Signature	Supervis	or Signature
Director Signature	AVP Signatı	ure (as needed)