



North Central State College

Telecommuting Agreement (Form 16-281c)

This is an agreement between _____ (“Employee”) and _____ (“Department”) to establish the parameters of a telecommuting agreement.

1. Telecommuting is established on the following basis:

Regular

The established telecommuting days are:

Monday Tuesday Wednesday Thursday Friday

The established telecommuting hours are:

M: _____ T: _____ W: _____ T: _____ F: _____

Occasional

Employee will provide _____ business days’ notice when telecommuting will be performed.

Emergency

2. This telecommuting arrangement will begin on: _____ and continue until: _____, or Until ended by written notice by either the Employee or the Department or the College.

3. The alternative work site address is: _____

4. The duties and assignments that are authorized to be performed at the alternate worksite are:

5. The following methods and frequency of communication are agreed to:

6. Other relevant details not covered specifically in this Agreement:

Telecommuting Agreement (continued...)

This is not a contract of employment between North Central State College (“College”) and the Employee and this does not provide any express or inherent rights to continued employment. This Agreement does not alter or supersede the term of the existing employment relationship.

I have read and understand the Telecommuting Policy & Guidelines and I agree to the duties, obligations, responsibilities and conditions described.

I understand and agree that effective communication and satisfactory completion of stated duties and assignments are keys to successful telecommuting. I further agree that, among other things, I am responsible for furnishing and maintaining my remote worksite in a safe and professional manner; employing appropriate information protection and security measures; and complying with all other policies and guidelines of the College. I agree to provide access to my work site upon reasonable notice by any agent of the College to conduct inspections as may be deemed necessary.

I agree not to use any College equipment for private purposes, and not to allow family members or friends to access that equipment. I understand that the College may pursue recovery for any College property that is deliberately or negligently damaged or destroyed while in my custody. I shall promptly return all College equipment and data when requested by my supervisor, and agree to follow all software licensing provisions agreed to by the College. I certify that equipment utilized for telecommuting meets the College’s telecommuting security standards. I understand that College data that resides on my workstation is owned by the College and subject to existing laws and policies governing the College.

I agree to notify my supervisor promptly when I am unable to perform work assignments due to equipment failure, illness, or other circumstances. I agree that no business meetings will be held in the remote work location without specific approval of my supervisor. I agree that travel between the alternative work location and the regular work location shall not be reimbursed. I also agree that telecommuting is not a substitute for childcare or care for a family member and that other arrangements are necessary for care of dependents or family members that are present in the alternative work location.

I understand that telecommuting is a privilege that requires the approval of my department, and the College, which may be withdrawn or modified at such time as the department or College deems appropriate, and that any modifications to this arrangement must be set forth in writing. I also understand that except when established for emergency situations, I may end this telecommuting arrangement upon written notice to my supervisor.

FOR THE COLLEGE:

Employee Signature

Approver Signature

Date

Date