## **DePauw University Remote Work Arrangement Agreement**

The following outlines the conditions and expectations for remote work as agreed to by the employee, direct supervisor and Human Resources, if required.

## **EMPLOYEE INFORMATION**

Employee name			
Department			
Period of agreement	Start:	End:	
Job title			
Supervisor name			
<u>RESPONSIBILITIES</u>			
Briefly describe the nature of the work to be performed at the remote location.			
On what criteria will the success of remote work be evaluated?			
LOCATION			
Where will the remote work be performed?			
Home	Other (describe)		
Street address			
Email			
Phone			
<u>SCHEDULE</u>			
Briefly describe the parameters of the remote work schedule (e.g., days per week, seasonality, etc.).			

## **COMMUNICATION EQUIPMENT** Briefly describe how communication will be handled (call forwarding, phone, email, videoconferencing, etc.). OTHER EQUIPMENT Employees must have sufficient internet security and malware protection at the remote location. If DePauw-owned equipment will be used by the employee at the remote location, then the employee and supervisor must note it below. No DePauw owned equipment will be used at the remote location. Employee initials: DePauw owned equipment will be used at the remote location. List DePauw equipment to be used. **ADDITIONAL CONDITIONS** Briefly describe any additional conditions agreed upon by the employer

## **DETAILS and EMPLOYEE ACKNOWLEDGEMENTS**

and supervisor.

This agreement is subject to the terms and conditions stated in the DePauw University Remote and Flexible Work Arrangements Policy for Staff. I agree that the sole purpose of this agreement is to regulate working remotely and it neither constitutes an employment contract nor an amendment to any existing arrangement.

I have read and understand the Remote and Flexible Work Policy in the Employee Guide and this agreement. I understand that all policies listed in the Employee Guide, including confidentiality and safety policies, will continue to apply during the remote work arrangement. I agree to abide by and operate in accordance with the terms of this agreement, and agree to the duties, obligations, responsibilities and conditions herein. I further understand that effective communication and satisfactory completion of stated objectives are keys to a successful remote work arrangement.

I agree that I am responsible for establishing remote work hours, observing wage and hour provisions as they apply, furnishing and maintaining my remote worksite in a safe manner, employing appropriate security measures, and complying with all other policies of DePauw University.

I understand that I must report any work related accidents or injuries as required under the Worker's Compensation Policy. I agree further to provide access to my work site by any agent of DePauw University to conduct post-accident or other investigations.

I understand that a remote work agreement is not an alternative to dependent care and my office environment will be conducive to working without distractions.

I agree to conform to DePauw's Electronic Communications and <u>Acceptable Use Policy</u> and not to use DePauw equipment for private purposes, nor allow family members or friends access to that equipment. I understand DePauw may pursue recovery for any DePauw property that is deliberately or negligently damaged or destroyed while in my care, custody and control. I shall promptly return all DePauw equipment and data documents when requested by my supervisor. I agree to follow all software licensing provisions agreed to by DePauw University. I understand that DePauw Information Services will provide routine repair and services on campus for DePauw-owned computers and that DePauw does not provide assistance with the set-up of a remote office. I agree that I am responsible for using surge protectors as well as maintaining software updates and virus protection; that I will incur costs for damages or repairs caused by failure to maintain and protect equipment.

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 my home, without specific approval of my supervisor. I understand and agree that travel between my home or remote work location and the primary worksite shall not be reimbursed.

I understand that I need to be on campus for meetings and days required by my department or the University; I also understand that I may be required to share office space during these times.

I understand that as with all University positions, the ability to work remotely requires meeting expectations of my job description and maintaining satisfactory performance.

I understand that working remotely is voluntary and requires approval. I may stop working remotely with written notice to my supervisor and I understand that my supervisor may, at any time, change any or all of the conditions under which I work remotely, or may withdraw permission for remote work. I also understand that this work arrangement is subject to a three month review in the initial year and annually thereafter.

Employee Signature & Date	
Supervisor Signature/Date	
Division VP Signature/Date	