



REMOTE WORK PLAN AND AGREEMENT

The University worksite remains the official work location. This document is intended to ensure that both the manager/supervisor and the employee have a clear, shared understanding of the employee's remote work arrangement. Each remote work arrangement is unique depending on the needs of the position, manager/supervisor and employee. In defining a remote work arrangement, the employee and their manager/supervisor are expected to identify work expectations and clearly communicate how expectations may be met.

The Remote Work Plan and Agreement form is to provide notice of the requirements for remote work, recognizing that remote work arrangements will not typically result in the duplication of office equipment.

Employee Remote Work Information

Employee Name:		Banner ID:	
Job Title:		Remote Location Phone Number:	Campus Ext:
Department:		Manager / Supervisor:	
Arrangement requested by: <input type="checkbox"/> Employee <input type="checkbox"/> Department			
Remote work arrangement (select one):		<input type="checkbox"/> 1 day per week <input type="checkbox"/> 2 days per week <input type="checkbox"/> 3 days per week <input type="checkbox"/> 4 days per week <input type="checkbox"/> Other; Describe schedule	
Physical location address where remote work will be performed:			
* The Office of Human Resources will notify the university payroll office of any remote location outside the state of NC			
Remote work arrangement effective dates:		Begin Date: End Date, if applicable: <input type="checkbox"/> Indefinite (reviewed at least bi-annually)	

Remote Work Expectations

The general expectation for a remote work arrangement is that the employee will effectively accomplish all of their regular job duties, regardless of work location.

I agree:

- To be available and responsive during scheduled work hours.
- My duties, obligations, and responsibilities, as a remote work employee, are the same as onsite employees, including my obligation to respond to my voicemail, e-mail and other messages in a timely manner.
- While performing work remotely, I will work at the above-listed location(s) during my normal, regular work schedule, unless I have received prior approval to temporarily work at an alternate location.
- That any time off or overtime must be prearranged according to department guidelines and consistent with the rules applicable to my employment (e.g., vacation, bonus, sick leave).

Specific expectations for this remote work arrangement should be summarized in the table below. Attach additional page(s) as needed.

Expectations	Manager’s Comments and Expectations	Employee’s Comments and Expectations
Communication		
Availability (if applicable)		
Events or activities which require in-person attendance. Detail any notice requirements.		
Other (List):		

Remote Work Arrangement Modification

The employee or departmental manager/supervisor may end an employee requested remote work arrangement by providing no less than thirty (30) calendar days’ written notice unless it is for alleged misconduct or an emergency, in which case it may be terminated immediately. This provision does not apply to arrangements made through the accommodation process. All employee proposed changes are subject to departmental approval.

Remote work agreements must be renewed at least bi-annually. Temporary or ad-hoc modifications to this agreement should be discussed between the employee and manager/supervisor. Long-term or substantive modifications should be documented by revising this agreement.

Remote Work Review

Specify a date to meet and discuss the effectiveness of the remote work arrangement, or check N/A if not applicable.

Remote work plan review date:	<input type="checkbox"/> N/A
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Equipment and Technology Access

The employee and the university agree to work together to ensure that the alternate worksite is safe, productive, and ergonomically suitable. The employee and unit shall work together to determine whether the unit will issue new or additional equipment necessary to perform the job, or if an employee already has the required equipment. Remote work arrangements do not typically result in the duplication of office equipment.

Specify any equipment or technology the employee will need to work remotely and whether it will be employee or university provided. In the event of equipment failure or service interruption, the employee must notify their manager/supervisor immediately to discuss alternate assignments or other options. Enter N/A if the item is not used.

Items provided by the University, including items purchased by the employee and reimbursed, remain the property of the University and may only be used for university business. University property must meet the expectations for information security, be properly secured, and returned to the University at the end of the remote work arrangement.

Employees are responsible for loss or damage to University property that is used when working remote.

Equipment by work location

Equipment	University Location	Provided by	Remote Work Location	Provided by/ Date Issued	Notes
Laptop					
Docking station					
Computer					
Mouse					

Keyboard					
Monitor(s)					
Desk					
Desk chair					
Web cam					
Phone					
Headset/microphone					
Power strip/extension cord					
Printer					
Fax/Scanner					
Office supplies					
Ergonomic modifications (e.g., keyboard tray, glare filter, foot stool, etc.)					
Other (list):					

Additional Details (if needed)

Policies and Procedure Acknowledgement

Policy/Procedure	Employee Initials
I have read and understand the university remote work policy and process.	
I understand that I am required to comply with all record keeping of hours worked and overtime regulations defined by state or federal law (e.g., the Fair Labor Standards Act) and leave absences via the university's employee self-service system.	
I understand that the work I perform while working remote remains subject to University records retention policy and applicable regulations, including the State of North Carolina public records act.	
I understand that work-related injuries at my remote work location during agreed-upon working hours may be covered by Workers' Compensation. I am required to report any work-related illness or injury to my manager/supervisor immediately and am required to complete an accident report as an internal record of the incident within twenty-four (24) hours of the event or claim.	
I agree to maintain the confidentiality of all University information and documents and prevent unauthorized access to any University system or information.	
I have read and understand the university's Acceptable Use Policy and Misuse of State Property Policy .	
I understand this remote work agreement is not a contract of employment, does not provide any contractual rights to continued employment, and may be terminated by the departmental manager/supervisor at any time with thirty (30) calendar days' notice, unless it is for alleged misconduct or an emergency, in which case, the agreement may be terminated immediately. This remote work agreement does not alter or supersede the terms of the existing employment relationship.	

Employee's Signature:

Date:

***Please attach completed Alternate Work Location Safety Attestation and IT Requirements form**

I agree to ensure the employee named herein is provided with the resources, training, equipment and supplies necessary for effective remote work. I agree that I have thoughtfully considered how to successfully onboard and integrate the remote work employee named herein into the department's teams, culture and opportunities.

Approval Manager/Supervisor or Department Head Signature:

Date:

Approval Vice Chancellor Signature:

Date:

Approval Assistant Vice Chancellor for HR Signature:

Date:

Approval Chancellor Signature:

Date: