

The University of Alabama in Huntsville Temporary Telecommuting Agreement

The purpose of this telecommuting agreement is to provide an alternate option for employees to perform

OBJECTIVE:

their work. Telecommuting is offered at the discretion of the University and with the approval of the appropriate manager and does not change the terms and conditions of employment. Telecommuting is a voluntary agreement between UAH and the telecommuter. **Terms of Agreement:** This is an agreement between the (department/unit/college/division) at the University of Alabama in Huntsville (hereinafter referred to as UAH) and _____ (Name of Employee) and shall cover the period from _____ through _____. This agreement establishes the terms and conditions of the temporary adjustment to your existing work assignment to allow you to work remotely during the defined time duration. This agreement may be discontinued at any time by either party with 5 days' notice and without adverse repercussions or liability. Pay and Attendance: The telecommuter's time and attendance will be recorded as if performing official duties at UAH and the telecommuter should report time as usual. Leave: Regular UAH holiday and leave accruals will remain the same. The employee will follow established departmental procedures for requesting and obtaining approval of leave. Accessibility: The employee will be accessible during regular work hours by telephone and email. Calls and emails are to be returned in a timely manner. The employee may also be required to participate in video conferencing. Equipment: The employee will provide his/her own equipment to be used in telecommuting unless equipment is issued by the department. UAH will not be responsible for employee-owned equipment used in the telecommuting program. Description of equipment to be used (Example: personal laptop): ______

Telecommuting Facilities: The employee will be responsible for providing his/her own internet access, with speeds equivalent to DSL or higher.

Description of telecommunications facilities (Example: Comcast):	
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Cost: UAH will not be responsible for operating costs, home maintenance, or any other incidental cost (e.g. utilities), associated with the use of the employee's residence or any costs of repair or maintenance relating to the employee's equipment used in the telecommuting program.

Liability: UAH will not be liable for damages to the employee's property resulting from participation in the telecommuting program. In signing this agreement, the employee agrees to hold UAH harmless against any and all claims, excluding on-the-job injury and illness claims. The employee agrees to hold UAH harmless for injury to others at the telecommuting location.

On-the-Job Injury and Illness (OJI): The employee is covered by UAH's OJI program if injured in the course of performing official duties at the telecommuting location provided the employee follows the procedures for reporting an OJI. On-the-Job Injury and Illness Policy and procedures can be found at https://www.uah.edu/rmi/injuries.

Verification of Home Safety: The employee will maintain a home office space that is free from safety and fire hazards.

Work Assignments: The employee will meet with the supervisor to receive assignments and to review completed work. The employee will complete all assigned work according to procedures mutually agreed upon with the supervisor.

Records: The employee is responsible for securing from theft any UAH property. The employee will use secure remote access procedures. The employee will apply safeguards which are approved by UAH to protect records from unauthorized disclosure or damage, including using passwords, and locked file cabinets. The employee will not share his/her passwords with anyone outside of UAH. The employee will also maintain regular anti-virus protection and computer backup. The employee will not download UAH confidential information onto nonsecure devices. All records, papers, and correspondence must be safeguarded for their return to the office and remain property of UAH. Employee agrees to abide by UAH policies on information security, software licensing, and data privacy. If there is any unauthorized access or disclosure of confidential information, the employee must inform UAH immediately.

Curtailment of the Agreement: Management has the right to remove the employee from the program if participation fails to benefit the organization or if the employee violates any of the terms of the agreement. The employee agrees to work at the office or telecommuting location, not from another unapproved site. Failure to comply with this provision may result in termination of the agreement, and other appropriate disciplinary action.

Work Hours and Location:

UAH Campus Work Location	
Telecommuting Location	
Employee's Contact Number	

	Work Hours	Work Location	Comments
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			

Commuting: Travel expenses (other than authorized) associated with commuting to UAH will be at the telecommuter's expense.

Modification of Agreement: UAH retains the right to modify the agreement on a temporary basis as a result of business necessity (for example, the employee may be required to come to the office on a particular day), or as a result of an employee request supported by the supervisor. This agreement does not constitute an employment contract for any specified period of time. Your employment with UAH will remain at-will and may be terminated by you or UAH at any time, for any reason, with or without notice.

Signature and Approvals: (Employees may consent to agreement in email to supervisors in place of physical signature)

By signing this agreement, I agree that I have read this Telecommuting Agreement and agree to the terms and conditions outlined above. I also agree I agree that my work hours, duties, responsibilities, and other terms and conditions of employment, including my salary, classification, and benefits, remain unchanged.

Employee (Telecommuter)	Signature	Date			
Review and Approval					
Supervisor/Manager Approve [] Disapprove []	Signature	Date			
Dean/Department Head Approve [] Disapprove []	Signature	Date			
Vice President Approve [] Disapprove []	Signature	Date			

Distribution: Original to Human Resources, SKH 102, Attn: Ramona Burroughs

Maintain a copy for departmental records Distribute one copy to the employee