



Remote Work Request Form

Complete this form to request a remote work arrangement. All requests must be approved by your supervisor and the President's Cabinet. Please send a signed copy of this form as an attachment to your immediate supervisor to begin the approval process.

Name: _____

Job Title: _____

Department: _____

Supervisor: _____

Schedule Request Details (proposed days/hours to work remotely and proposed days/hours to work on campus):

Please provide rationale for your request and explain how your proposed remote schedule will impact the service provided to students, coworkers, and/or the College community.

Describe how you will maintain the quality, quantity, and productivity of your work during a remote-work arrangement.

Confirm you have a working computer and stable Wi-Fi connection at your remote location.

Confirm you agree to arrange for child/dependent care as necessary for the hours in which you propose to work from home.

Confirm you agree that personal tasks and errands should only be performed during your scheduled breaks and lunches.

I understand the following as it relates to my remote work request:

- Employees approved for a remote work arrangement must sign a Remote Work Agreement that outlines the agreed-upon remote work arrangement and confirms that the employee will follow the guidelines described in the Remote Work Policy.
- The amount of time and work hours that the employee is expected to work will not change due to participation in a remote work arrangement.
- Hours of work should remain the same as the traditional college business hours unless specified differently and approved by the applicable supervisor.
- If remote work is approved, the employee may still be required to come to campus for meetings or other business purposes.
- Normal procedures will be followed for the approval of overtime and use of leave.
- Henry Ford College may modify or discontinue the remote work arrangement at any time.

Employee's Signature: _____