



Unified Government Human Resources Guide

Effective 07/01/22

REMOTE WORK AGREEMENT

Employee Name: _____ Department: _____ Employee ID#: _____

Manager Name: _____ Department Head: _____

Date of Hire: _____ Remote Work Contact Number: _____

Remote Work Arrangement Type: _____ (Regular, Episodic or Emergency)

Start Date of Agreement: _____ End Date of Agreement: _____

To be completed by the employee.

Please read and initial that you understand and agree to the following terms and conditions:

- _____ I acknowledge I have received and read a copy of the remote work policy.
- _____ I understand that I must adhere to the remote work policy, and to the procedures, terms, and conditions of the approved remote work agreement.
- _____ I understand that I am prohibited from engaging in any other gainful employment during the time that I am being compensated for working by the Unified Government.
- _____ I understand that this remote work agreement may be terminated at any time by myself, my department head, or the County Administrator.
- _____ I acknowledge that this Remote Work Agreement in no way modifies the Unified Government's employee residency requirement. I understand that I must maintain residency in Wyandotte County as required by Unified Government policy, throughout my employment with the Unified Government whether I work remotely or at my remote work location.
- _____ I understand that I may not engage in remote work in lieu of taking accrued leave. Examples of such leave include sick leave, vacation leave, leave of absence without pay, donated sick leave, compensatory time, or Family and Medical Leave.
- _____ I understand that the Unified Government is not liable for any injuries to family members, visitors, or others at my remote work location.
- _____ I understand that the Unified Government complies with all applicable federal and state laws, including the Fair Labor Standards Act and the laws governing worker's compensation, and that it is my responsibility to track my time accurately, and to communicate with my supervisors and/or department director regarding any deviation in my regular schedule and that failure to comply with this provision may subject me to termination of employment.



Unified Government Human Resources Guide

Effective 07/01/22

- _____ I understand that I must comply with Unified Government policies for information, technology, security, document and data confidentiality, and use of government equipment and materials. This includes ensuring that all recording devices and artificial intelligence (e.g., Alexa, Google Nest, Apple Home, etc.) are turned off while working.
- _____ I understand that I must provide functioning internet service while I am working at my remote worksite.
- _____ I understand that Unified Government information or documents stored on my personal devices may be subject to public disclosure requirements.
- _____ I understand that I must request and receive pre-authorization to work overtime or compensatory time.
- _____ I understand that I must ensure personal disruptions such as non-business telephone calls and visitors are kept to a minimum.
- _____ I understand that I must not participate in or facilitate in-person meetings at any remote work location. I understand that virtual meetings may be conducted from the remote work location.
- _____ I understand that I am required to maintain satisfactory levels of performance as determined by my department head and/or manager.
- _____ I understand that I am required to be productive and available throughout my regularly scheduled workday.
- _____ I must be available by phone during my scheduled work hours.
- _____ I understand that I must keep my Outlook calendar visible and up to date indicating scheduled meetings, leave time, and any other information to show my status throughout my regularly scheduled workday.
- _____ I understand that I may be required to submit to terms and conditions not required of me when I work at my regular worksite, such as to complete a task list and time log and submit it to my department head or manager for remote work location days.
- _____ I understand that I may be required to return to my regular worksite at any time throughout my regularly scheduled workday at the request of my department head or supervisor.
- _____ I understand that I must have adequate space in my home/at a remote location to dedicate remote work.

Department head and/or manager's expectations while remote working (attach additional pages if needed for this comment):



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How employee's productivity and work product will be measured while remote working (attach additional pages if needed for this comment):

Weekly schedule: (any changes to the established schedule must be approved by department head or manager in advance)

	Work location- use office, remote or regular day off (RDO)	Work start time	Lunch periods start time*	Lunch period end time*	Work end time
Sunday	_____	_____	_____	_____	_____
Monday	_____	_____	_____	_____	_____
Tuesday	_____	_____	_____	_____	_____
Wednesday	_____	_____	_____	_____	_____
Thursday	_____	_____	_____	_____	_____
Friday	_____	_____	_____	_____	_____
Saturday	_____	_____	_____	_____	_____

*If lunch period varies from above, you must notify your department head or designee.

List Remote Work Location : _____

I have read, understood, and agree to the above Remote Work Agreement terms and conditions. I understand and accept the performance expectations and rules identified by my department director/manager. This arrangement is not indefinite and will be reassessed at least annually by department director/manager. Questions about this Remote work Agreement and arrangements should be directed to my department director/manager. I will abide by the Unified Government Human Resources Guide policy 2.20 Remote Work Policy. My signature below signifies my understanding, agreement, and acceptance.

Employee signature _____ **Date** _____

Manager signature _____ **Date** _____

Department head approval **Approved** ___ **Denied** ___

Comments: _____

Department head signature _____ **Date** _____

Please retain signed copy in department file; the original signed form must be sent to HR with the employee's Remote Work Assessment form within 10 business days.