Telecommuting Agreement

Employee Information:

<table>
<thead>
<tr>
<th>Employee Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Alternative phone/contact</td>
<td></td>
</tr>
<tr>
<td>Job Title:</td>
<td></td>
</tr>
<tr>
<td>Position Title:</td>
<td></td>
</tr>
<tr>
<td>Supervisor Name:</td>
<td></td>
</tr>
<tr>
<td>Division:</td>
<td></td>
</tr>
</tbody>
</table>

Current status (circle one on each line):

<table>
<thead>
<tr>
<th>Full-Time</th>
<th>Part-Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exempt/Salaried</td>
<td>Non-Exempt/Hourly</td>
</tr>
</tbody>
</table>

Telecommuting Specifics:

<table>
<thead>
<tr>
<th>Arrangement requested by (circle one):</th>
<th>Employee</th>
<th>Employer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duration of Telecommuting agreement:</td>
<td>(from)</td>
<td>(to)</td>
</tr>
</tbody>
</table>

Schedule of Telecommuting agreement (days and frequency, such as every week, every other week, etc.):

_______________________________________________________________________

Location where work will be performed (Address, specify whether home address or other location):

_______________________________________________________________________

Please note any equipment required for telecommuting:

_______________________________________________________________________

Any Telecommuting-specific job duties and/or expectations beyond regular job duties. Attach additional sheets as needed:

_______________________________________________________________________
In addition to your existing obligations and responsibilities, as a telecommuting employee, you must agree to the following:

- Maintain a presence with your department which may be done through Zoom, Teams, email, text messaging, phone, etc. This includes maintaining the same response times as if you were a campus-based employee. You agree to make yourself physically available to attend scheduled meetings as requested or required by the department.
- If you are a non-exempt (hourly) employee, you understand you are not permitted to work overtime without prior approval from your supervisor. You must keep accurate track of your hours and you are not permitted to do any work “off the clock”.
- Forward your work phone to the telecommuting location on telecommuting days.
- Comply with all University policies and safety regulations that apply to your work while on University property.
- Do not allow university business visitors to your home or off-site work location without the express written permission of your supervisor.
- Be responsible for any university equipment used off-site as you may be responsible for any damaged equipment if handled in a careless or reckless manner. The university is not responsible for your personal equipment. Immediately notify your supervisor and IT if University equipment is lost or stolen.
- Notify your supervisor immediate of any work-related injuries incurred while telecommuting during regularly scheduled working hours as these may be covered by workers’ compensation insurance.
- Understand that your supervisor may revoke the telecommuting arrangement at any time with as much written notice to you and HR as is practical.
- Remember you are a representative of the University no matter where you are. Please use your best judgment at all times.
- Verify that you have read, understand, and will follow the University’s Telecommuting policy.
- Understand that telecommute work and/or remote work is a privilege; it is not an entitlement; it is not a university-wide benefit; and it in no way changes the terms of your employment with Butler University. All employees who are permitted to telecommute or work remotely remain subject to the terms and conditions of employment set forth in the Staff Policy Handbook. Please note that any previously engaged telecommuting or remote work arrangement does not require management to agree to future work.
- Affirm that you remain and at-will employee and are solely responsible for any state or local tax ramifications created by this arrangement.
- If the arrangement includes an out of state work location, you affirm that you are moving voluntarily and that Butler has not asked you to move. Additionally, you agree that you recognize Butler University is an Indiana not-for-profit corporation and by agreeing to remain employed by Butler University, you agree that in the event of any dispute between you and Butler, the laws on the State of Indiana shall apply and any legal action will be initiated and resolved in Marion County, Indiana either in federal or state court.
- Complete the IT Telecommuting Requirement outlined at the top of this web site.
By signing, I signify that I understand and agree to the above:

_____________________________________________  ______________________
Employee Signature        Date

_____________________________________________
Print Name/Title

**Approvals:**

_____________________________________________  ______________________
Supervisor Signature        Date

_____________________________________________
Print Name/Title

_____________________________________________  ______________________
Division VP Signature        Date

_____________________________________________
Print Name/Title

**HR Review:**

Date of meeting with supervisor: ____________________

Approved? (Circle one):       Yes   No

_____________________________________________  ______________________
HR Representative Signature       Date

_____________________________________________
Print Name/Title

The completed form will be filed with the employee’s home department and in the employee’s HR file.