



DOANE UNIVERSITY

Remote Work Agreement

Employee Name: _____

Employee Title: _____

Department: _____

Supervisor Name: _____

Proposed Start Date: _____ through _____.

EMPLOYEE CERTIFICATION

1. I have read the full Remote Work Policy located in the Employee Handbook.
2. I understand that my duties, obligations, responsibilities and the terms and conditions of employment with Doane University remain unchanged except those obligations and responsibilities specifically addressed in this agreement. My salary and benefits remain unchanged as well as a result of my remote work. I understand that this agreement does not constitute an employment contract.
3. I understand that this agreement is voluntary and may be revoked or modified by the University or me at any time for any reason. I understand that this agreement does not create an entitlement to continued remote work. If the agreement is terminated, a reasonable time will be given for me to transition back to the worksite.
4. I understand that the University will review this agreement after a trial period of 60 days and may, in its discretion, revoke or modify this agreement at that time.
5. I agree that I will not be the sole provider for any dependent in need of primary care during my work hours, and I will make regular dependent care arrangements during remote work periods.

6. I agree that my total number of work hours will not change due to my remote work and that I will continue to be responsible for reporting my time as required by department and University procedures.
7. I agree that my work hours, overtime compensation, use of sick leave, approval for use of vacation and requests for a Leave of Absence will conform to University policies and procedures, departmental guidelines, and to the terms otherwise agreed upon by my supervisor and me.
8. I understand that I may be required to travel to the central workplace for department meetings or important events at my expense unless otherwise determined by my supervisor.
9. I agree to maintain a safe and secure work environment and to designate a remote workspace to accommodate any equipment to be used in my work. I will protect the workspace from any hazards and dangers that could foreseeably affect the equipment and me.
10. I agree to report work-related injuries to my supervisor and Doane Human Resources within 24 hours or at the earliest reasonable opportunity. I agree to hold the University harmless for injury to others at the alternate work location.
11. I agree to restrict the use of University-provided equipment and supplies located in my alternate work location to the same policies that apply to equipment at the central workplace.
12. I agree to implement all computing security measures required for the classification level of data with which I work. I am responsible for implementing and complying with the requirements set forth by Technology Services. I understand these requirements include:
 - a. Ensuring that University-provided anti-virus and anti-spyware subscriptions are kept current, and promptly notifying IT of any warning messages stating they are not current.
 - b. Ensuring that proper protection of computing resources at the remote location is in place. Any wireless connection must be encrypted using a wireless encryption protocol (WPA) or by connecting to the Doane University VPN client.
13. I agree to notify Technology Services immediately by emailing help@doane.edu or filing a ticket on Service Now if symptoms of a virus or spyware infection occur.
14. I agree to maintain the security and confidentiality of materials I access as part of my employment, and to abide by the University's policies for employees, including those covering information, security, software, software licensing and data privacy, conflicts of interest, outside employment, ethics, conduct as well as the requirements of applicable state and federal government statutes.

15. I agree not to download any University data or information onto my personal computer.
16. I understand that all equipment, information, documents, records and materials provided by my department or Doane University remain the property of the University. I also understand that any information or documents used or created by me in the performance of my work assignments are the property of Doane University.
17. I understand that office supplies will be provided by the University as needed and that any out-of-pocket expenses for other supplies will not be reimbursed unless I have the prior approval of my supervisor.
18. I agree to return University equipment, records and materials within two (2) days of termination of this agreement. All University equipment will be returned by me for inspection, repair, replacement or repossession within two days written notice.
19. I agree to be available during the assigned business hours, as stipulated in this agreement, for communication by phone, voicemail, email, etc.

I have read the contents of this Remote Work Agreement and the Remote Work Policy. I certify that I will abide by all of the requirements of this Agreement.

Employee's signature: _____ Date: _____

Reason for the Request:

Remote Work Schedule Request (Please complete):

- ☐ 100% remote work
- ☐ Remote work and on-site work

Please provide proposed work schedule (days and hours) on and off site:

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Alternate Work Location and Contact Information:

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Is this the Employee's residence?: Yes ☐ No ☐

Phone Number: _____

Equipment to be provided by Doane University

(Please contact IT to discuss security measures and software/hardware requirements). Please describe equipment:

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APPROVALS

Based on a review of suitable considerations, we have concluded that remote work is appropriate under the circumstances. The above-named employee is granted approval to participate in accordance with the agreement set forth above.

Supervisor's approval: _____ Date: _____

Leadership Team Member's Approval: _____ Date: _____

Human Resources Approval: _____ Date: _____

Please download this form and fill in the required information. When complete please print, obtain the required signatures, and submit the form to Human Resources.

Remote work cannot begin until all parties have signed the Remote Work Agreement and it is on file with Human Resources.