



TITLE:
Telework Agreement

FORM: GF-R-F(2)

Updated 6/9/21

This document is intended to ensure that both the supervisor and the employee have a clear, shared understanding of the employee’s telework arrangement. Each telework arrangement is unique depending on the needs of the position, supervisor, and employee. This form can be adapted to department requirements as necessary.

This telework agreement is not a contract of employment and does not provide any contractual rights to continued employment. It does not alter or supersede the terms of the existing employment relationship.

Employee Telework Information

Employee Name:	
Job Title:	
Department:	
Supervisor:	
Arrangement requested by:	<input type="checkbox"/> Employee <input type="checkbox"/> Supervisor
Location where telework will be performed:	
Telework arrangement effective dates:	

Teleworking Plan

Delineate the components and expectations of the plan including allowable circumstances, anticipated frequency, if preapproval is required, etc.

Telework Review

Specify a day and time to meet and discuss the effectiveness of the telework arrangement.

Telework plan review day/time:	
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Equipment and Technology Access

The employee and employer agree to work together to ensure that the alternate worksite is safe and ergonomically suitable. Specify any equipment or technology access the employee will need to telework and whether it will be employee or employer provided. In the event of equipment failure or service interruption, the employee must notify employer immediately to discuss alternate assignments or other options.

Equipment:	Provided by:	Responsible for loss or damage:

The employee agrees to the following conditions:

1. All MPS Governing Board Policies and administrative regulations, including but not limited to attendance, holidays, personal time, vacation and sick time away from work and overtime continue to apply when the employee is teleworking. If the employee is unable to telework when scheduled to do so, including during an emergency situation, due to illness, dependent care responsibilities, or other personal needs, the employee will take appropriate leave (e.g., annual or sick leave). The employee may be granted excused absence on a case-by-case basis when other circumstances (e.g., power failure) prevent the employee from working at the telework site.
2. The employee's job responsibilities and promotional opportunities will not change due to participation in the telecommuting agreement.
3. The employee is expected to remain accessible during designated work hours and comply with the Support Staff Workday Governing Board Policy and administrative regulation (GDK and GDK-R).
4. The employee will report to the assigned worksite as necessary upon directive from the supervisor.
5. The employee understands that the District retains the right to modify this agreement on a temporary or permanent basis for any reason at any time.
6. The employee is expected to meet established performance standards.
7. The employee understands that all equipment, records and materials provided by MPS shall remain the property of MPS.
8. The employee agrees to take all necessary precautions to secure all MPS equipment, data, files and other material to prevent unauthorized access, destruction or tampering.
9. The employee will always maintain a safe and secure work environment.
10. Supplies required to complete assigned work at alternate work location should be obtained during onsite office visits. Out-of-pocket expenses for supplies normally available through MPS will not be reimbursed.
11. If the employee is teleworking due to a school closure resulting from widespread illness or pandemic and/or when the traditional worksite is closed due to emergency situations (e.g., weather-related emergencies, act of terrorism, etc.), the employee's supervisor will, to the extent practicable, include a description of emergency duties within this agreement if the emergency duties differ from the employee's normal duties. In an emergency situation, the employee is expected to telework for the duration of the emergency, returning to the assigned worksite only when so directed by his or her supervisor.

Employee Agreement

- I understand it is my responsibility to maintain the safety and appropriate arrangement of my offsite workspace, if it is my home. If any misleading, or fraudulent information has been provided, it is sufficient grounds for terminating my telework agreement.
- I understand that I will report to my assigned worksite as necessary upon directive from my supervisor.

Employee Signature and Date: _____

Supervisor Signature and Date: _____

*Member of Superintendency Signature and Date: _____

****(Required if employee will telework for longer than two consecutive pay periods)***