

Appendix A. Schedule Change

Complete when the alternative work arrangements of staggered scheduling, flexible work hours, flexible lunch periods, reduced FTE or compressed work week are being requested. Attach completed form to the Agreement Form.

1. Proposed Work Plan:

2. Advantage to the Department:

3. Plan for communication/cooperation:

Appendix B. Telecommuting

Location of remote work arrangement (address): _____

This location is: employee's residence off-site location established by Concordia College

Terms of Agreement:

The duties, responsibilities, and conditions of employment remain unchanged. The staff member must comply with all college policies and procedures while working off-site. Salary and benefits remain unchanged and Workers Compensation benefits will apply only to injuries arising out of and in the course of employment as defined by Workers Compensation law. The staff member must report any such work-related injuries to their supervisor immediately. Concordia is not responsible for injuries or property damage unrelated to such work activities that might occur in the remote work setting.

Overtime compensation (for non-exempt staff) and leave programs will continue to be based on hours paid during the telecommuting arrangement. Requests to work overtime, declare vacation or take time off from work must be pre-approved with the staff's supervisor. According to the terms of this Agreement, the off-site work schedule is detailed in this agreement. For non-exempt staff, this specification must be in accordance with FLSA guidelines and should include meal breaks. If the staff member needs to change their schedule, they agree to obtain advance approval from the supervisor.

The staff member's use of equipment, software, and all other resources provided by Concordia is limited to the purposes of remote work and is not intended for the staff's personal use. The college does not provide home internet service or phone service (unless approval from Director or Vice President is provided for cell phones). The decision to remove or discontinue use of the resources listed in this agreement shall rest entirely with Concordia. In the event the staff member ceases employment with Concordia, or the remote work arrangement is discontinued for any reason, the staff member agrees to return all Concordia property within 48 hours.

If applicable, the department/unit will provide or arrange for maintenance of the equipment provided to the staff member through remote work, and may provide for insurance coverage as per the College's policy. However, the staff member is responsible for the cost of repairs caused by the misuse or abuse of the equipment. Concordia reserves the right to exchange or retrieve college-owned property with reasonable advance notice.

Concordia will not reimburse the staff member for the cost of off-site related expenses such as heat, water, electricity, and any insurance coverage not provided by the College. Personal tax implications related to the off-site work space shall be the staff's responsibility. For guidelines on remote work conducted outside of Minnesota, see:

The staff member has the responsibility for maintaining the security and confidentiality of college files, data and other information that are in the off-site work place. It is important to be familiar with all institutional policies and specific department policies that address confidentiality, such as FERPA, HIPAA, Clear Desk – Clear Screen, etc.

Remote work is not to be regarded as a substitute for ongoing child care or adult care. If applicable, the staff member will attach a general description of caregiving arrangements that will be in effect during the remote work hours. If the staff member needs to modify these arrangements, they will inform the supervisor and obtain the necessary approvals to continue the remote work arrangement.

Concordia will provide the following equipment, software, communications resources, and/or other supplies (provide as much detail as possible, including serial or registration numbers, if applicable).

1. Hardware (e.g., computer, webcam, etc.):

2. Software:

3. Communications Resources (e.g., phone forwarding service):

(Note: Internet service is not provided by the College. Cell phone service requires department head approval.)

4. Other (e.g. office supplies):

5. Additional comments/notes:

The staff member is expected to make regular visits to the on-site workplace in review work and progress with supervisor, and to meet with co-workers and customers on the following basis:

I have read and understand the above expectations relating to the telecommuting arrangement. I understand that this work arrangement can be withdrawn at any time.

Employee Name (Printed)

Supervisor Name (Printed)

Employee Name (Signed)

Employee Name (Signed)

Date

Date

Appendix C. Job Share Arrangement

The following questions will be reviewed and the responses communicated to ensure a mutual understanding of the terms of the job share. A complete position description, clearly defining the division of duties between the job share participants, should be attached to this form.

Individual 1: _____

Individual 2: _____

Start Date: _____

Start Date: _____

Review Date: _____

Review Date: _____

1. Identify the specific schedule and time commitment for each staff member.
2. How flexible is the above schedule and are there any conditions attached to such flexibility? Are the staff members allowed to "trade schedules" with each other? Is advanced notice of any schedule change required?
3. If either staff member needs to take paid or unpaid time away from work, what coverage will be required of the other participant? If the other staff member will be expected to cover during absences, will advance notice to the staff member who is filling in be expected? How long will such coverage be expected to last?
4. If either staff member leaves the job share arrangement indefinitely, what will be the required of the remaining staff member? If there are coverage expectations, what minimum advance notice is expected to be provided to the staff member who is covering? How long will coverage be expected to last?
5. What methods of communication between the job share staff members will be used to allow for the smooth functioning and coordination of the position? (Note: Internet service is not provided by the College. Cell phone service requires department head approval.)
6. How often will the arrangement be reviewed to assess whether it's meeting the needs of the department/participants?
7. Are there any other details of this job share arrangement (attach)?

Employee Name (Printed)

Supervisor Name (Printed)

Employee Name (Signed)

Supervisor Name (Signed)

Date

Date