## COLGATE UNIVERSITY

## **Working from Home Agreement**

Linployee information		
Name:	Hire date:	<u></u>
Job title:		
Department:		
Supervisor:		
This Working from Home Agreeme	nt will begin and end on the f	ollowing dates:
Start date: End	date:	
Off Campus Work Location:		
Employee's normal schedule:		

## I agree to the following conditions related to working from home:

Employee Information

- To remain accessible and productive for my scheduled number of hours and during the agreed upon work hours. Variations of my normal schedule will be discussed with, and approved by, my supervisor.
- If I am an hourly employee, I will record my actual hours worked and meal periods taken in accordance with applicable timekeeping practices, University, and regulatory requirements.
- If I am unable to perform my duties, I will let my supervisor know that I am unable to work and will use a sick or vacation day, as appropriate.
- If I am unable to report to campus, due to the results of my daily self monitoring for COVID-19 symptoms, but am still able to perform work, my supervisor and I will determine appropriate work to be performed by me from home.
- If I am an hourly employee, I will obtain my supervisor's approval prior to working unscheduled overtime hours.
- To communicate regularly with my supervisor and co-workers, by the method and at the frequency agreed upon with my supervisor(s).
- To comply with all rules, policies, practices, and instructions that normally apply to me as an employee
  of Colgate University.
- To follow the <u>Remote Working Technology Guide for Employees</u>.
- To inform my supervisor of my work location.
- To maintain a safe working environment, including ergonomically correct, at all times, or use of PPE as required. I will report any work-related injuries to my supervisor, as soon as practicable, via the online <u>Employee Incident Reporting</u> system.
- To protect any and all University property and other resources from theft or damage. I will immediately
  report any theft or damage to University property to my supervisor, who will initiate a report with
  Campus Safety, as appropriate.

- To allow the University to make arrangements, as appropriate, to provide access to business-related material and equipment for essential business purposes, should I become unable to perform my duties.
- That my supervisor and/or the University retains the right to modify this agreement on a temporary or
  permanent basis, with at least two week's notice, whenever possible. (e.g. deemed essential, presence
  required on campus, unsatisfactory performance level, etc.). Supervisors will consult with Human
  Resources.
- If my employment with Colgate University ends, I will return all equipment on or before my last day, unless other arrangements are made with the Department of Human Resources.
- To comply with all Colgate University policies, including the confidentiality and computing policies, and expectations regarding information security. I will ensure the protection of proprietary University and customer information at all times from my home office.
- I will seek approval from my supervisor, in consultation with IT, for equipment needs and register the
  Colgate owned equipment that is located in my home office by completing the <u>Colgate Equipment in
  Your Home Office</u> survey.

I have read the above and agree to comply w	ith the conditions as outlined for working from home.	
Employee signature:	Date:	
	the case of multiple supervisors — coordinated efforts. I	•
commit to engaging in practices that will assi- reviewed the <u>Supervisor Guidelines for Remo</u>	st this employee to be successful, while working at home. te Work.	I have
Supervisor signature:	Date:	
cc: Human Resources - copy for employee's	file	

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