

Remote Work Employee/Supervisor Agreement:

Employee Name:

Employee Position:

Supervisor Name:

Remote Work Qualification Matrix:

A response of “yes” to any of the following questions could place limitations on the employee’s ability to successfully work in a remote setting. A response of “yes” to question one (1) disqualifies the individual from working remotely, under this policy, on student school days.

Components related to Employees	Yes	No	Additional information relevant to the remote work request:
1. Does the employee work at a school location?			
2. Is the employee requesting remote work during the regular school year when students are present on campus?			
3. Does the employee have staff supervision responsibilities?			
4. Does the employee have responsibility for district level programs or a department?			
5. Does the employee have student supervision responsibilities?			
6. Does the employee have responsibilities to greet and provide support for parents or community members?			
7. Does the employee have responsibilities to provide back up for a colleague that greets and provides support for parents or community members?			
8. Does the employee have responsibilities to greet and provide support for district employees?			
9. Does the employee have job responsibilities that can only be conducted on-site?			
10. Does the employee’s job responsibilities require in-person collaboration?			
11. Does the employee’s job responsibilities require the use of special equipment or software that are only available on site?			

Documenting the components of a remote work schedule:

The following information is to be completed as part of the process for an employee to request a remote work schedule. The information is to be completed using the following process:

- *Step 1: Completed by the employee*
- *Step 2: Evaluated and verified by the supervisor*

Job Responsibilities to be completed during remote work:

Please document the specific job responsibilities that will be completed during remote work.

Employee's Comments:
Supervisor's Comments

Communication Plan during remote work:

Please document the methods of communication during remote work and specific phone numbers where the employee can be reached during the workday.

Employee's Comments:
Supervisor's Comments

Requested Schedule during remote work:

Please document the remote schedule you are requesting.

Employee's Comments:
Supervisor's Comments

The following section is to be completed by the Supervisor.

Final Decision:

- This employee is being denied approval for remote work.
- This employee is being approved for remote work.

If denied, what are the reasons?
If approved, what is the approved schedule and time period (no more than one calendar year) being approved for remote work?

This agreement is subject to LWSD Remote Work Policy 5214 and Remote Work Procedure 5214P and can be terminated at any time by the supervisor. By signing the Remote Work Employee/Supervisor Agreement, you are agreeing to the contents of this written agreement and all conditions outlined in the Policy and Procedure.

Employee Name

Employee Signature

Date

Supervisor Name

Supervisor Signature

Date

Please scan and send the signed Remote Work Employee/Supervisor Agreement to: HumanResources@lwsd.org

The supervisor and employee should retain a copy of the Remote Work Employee/Supervisor Agreement.

Adopted:
10/19/21