

Bryant University

Remote Work Agreement Form

This document is intended to ensure both supervisor and employee have a clear, shared understanding of the employee's ongoing Remote Work agreement. Each arrangement is unique depending on the needs of the employee, supervisor, position, department, and the University. This agreement is not a contract and does not provide contractual rights to continued employment or to satellite work location. It does not alter or supersede the terms and conditions of employment of the current employment agreement.

EMPLOYEE REMOTE WORK LOCATION INFORMATION:

Employee Name:	
Employee ID Number:	
Job Title:	
Department:	
Supervisor:	
Requested By:	
Address of the Satellite Work Location:	
Remote Working Start Date:	
Next Remote Agreement Review Date:	

JOB DUTIES AND SUPERVISOR REVIEW

The general expectation for a Remote Work arrangement at a satellite work location is that the employee will effectively accomplish their regular job duties regardless of where they are located. If there are specific job duties and/or expectations that may require the employee to be away from the satellite work location during scheduled remote work (i.e., travel, on-site/off-site meeting, and training participation), specify in the box below or enter N/A.

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WORK SCHEDULE AND LOCATION

Please provide your typical work schedule with an understanding that schedule variations may occur.

Day of the Week	Work Schedule	Work Location
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Notes about work schedule (including departmental/divisional blackout periods:

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REMOTE WORK ARRANGEMENT MODIFICATION

Either the employee or the University may end the Remote Work arrangement as outlined in the policy. All employee-proposed changes to an existing agreement are subject to department and/or university approval.

REMOTE WORK REVIEW

Remote Work agreements are to be reviewed annually (at minimum). Modifications to the agreement should be documented and reviewed by the employee and supervisor. Long-term or substantial modifications should be documented through a revised agreement.

SPACE, EQUIPMENT AND TECHNOLOGY ACCESS

The employee and supervisor agree to work together to ensure that the Remote Work location is safe, ergonomically suitable, free from distractions, and allows for maintaining appropriate confidentiality of records and information. The employee agrees to immediately report any job-related accidents occurring during established work hours to facilitate timely reporting. All information technology guidelines should be followed to ensure the safety and security of data. In the event of equipment failure or service interruption, the employee should notify the Bryant IT Help Desk immediately at helpdesk@bryant.edu.

POLICY AND PROCEDURE ACKNOWLEDGEMENT

POLICY ACKNOWLEDGEMENTS	EMPLOYEE INITIALS	SUPERVISOR INITIALS
I have read and understand the University Remote Work policy.		
I have read and understand the University Information Technology policy.		
I have reviewed and understand the University time and leaving reporting requirements.		
Please return a complete form to your supervisor and Human Resources at humanresources@bryant.edu .		

Employee Signature _____ Date: _____

Supervisor Signature _____ Date: _____

Department Head Signature _____ Date: _____

Dean/Division Head Signature _____ Date _____