



## Remote Work Agreement

### Section 1 - To Be Filled Out By Employee:

Employee Name:  Date:

Department:  Job Title:

Employee Z-number:

- |  | Yes                   | No                    |
|--|-----------------------|-----------------------|
| 1. Does the work require regular face-to-face contact with a supervisor, other employees, students and/or members of the University community or the public? | <input type="radio"/> | <input type="radio"/> |
| 2. Can job functions be performed at a remote site without diminishing quality or productivity of a unit?  | <input type="radio"/> | <input type="radio"/> |
| 3. Is the employee's presence required at the regularly assigned place of employment on a routine basis?   | <input type="radio"/> | <input type="radio"/> |
| 4. Does the position have an emphasis on the electronic production and/or exchange of information by means of technology?                                    | <input type="radio"/> | <input type="radio"/> |
| 5. Does the work involve measurable or quantifiable work product?  | <input type="radio"/> | <input type="radio"/> |
| 6. Are there specialized materials or equipment available only at the regularly assigned work site?  | <input type="radio"/> | <input type="radio"/> |
| 7. Does the work require direct handling of secure information that requires on-site presence?   | <input type="radio"/> | <input type="radio"/> |

Detail your request for office equipment, hardware, software, communication needs, and office supplies needed to participate in telecommuting from a remote work site.

### Section 2 - To Be Filled Out By Supervisor:

- |  | Yes                   | No                    |
|--|-----------------------|-----------------------|
| 1. Do you agree with the answers to the questions above?   | <input type="radio"/> | <input type="radio"/> |
| 2. Does the employee have the ability to successfully organize, manage time and work independently?            | <input type="radio"/> | <input type="radio"/> |
| 3. Does the employee have at least a satisfactory work performance?  | <input type="radio"/> | <input type="radio"/> |
| 4. Does the employee have a thorough knowledge and understanding of their job functions?                       | <input type="radio"/> | <input type="radio"/> |
| 5. Has the employee had prior discipline with a two-year period?   | <input type="radio"/> | <input type="radio"/> |
| 6. Will approval of this agreement shift job duties to another employee or change the duties of this position? | <input type="radio"/> | <input type="radio"/> |
| 7. Is approval of this agreement in the best interest of the University?                                       | <input type="radio"/> | <input type="radio"/> |

Anticipated Start Date: \_\_\_\_\_

### Section 3 - This checklist is designed to ensure that the employee and supervisor understand the remote work requirements and procedure.

- The employee and supervisor have established a work schedule for hours/days at a remote work site.  
List schedule: \_\_\_\_\_
- Policies and procedures for care of equipment issued by the University have been explained and are clearly understood.
- Policies and procedures covering financial information and data security have been discussed and are clearly understood.
- Requirements for an adequate and safe office space and/or area have been discussed, and the employee certifies those requirements are met.
- Performance expectations have been defined and are clearly understood.

6. The employee understands that the University may terminate the remote work agreement at any time. The employee further understands that management may terminate the remote work arrangement immediately if the employee's performance declines or the arrangement fails to support organizational needs.
7. The employee also understand that all equipment issued to them by the University is the property of the University and must be returned immediately upon request.

**Section 4 - The following constitutes an agreement on the terms and conditions of the remote work arrangement, as required in the Remote Work Procedure (6171), between the University and employee.**

**By signing this form, I acknowledge that:**

I have read and understand the provisions of Stockton University's Remote Work Procedure (6171) and agree to abide by the requirements set forth therein; and

I specifically acknowledge that the University may terminate the remote work agreement at any time and that remote work is not an employee right or guaranteed employee benefit.

**Employee Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**APPROVALS:**

**Supervisor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Director/Dean:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Vice President:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Completed, signed agreements can be submitted to [Human.Resources@stockton.edu](mailto:Human.Resources@stockton.edu)