

Northern Kentucky University

Flexible Work Arrangement Form

A Flexible Work Arrangement enables an employee to work from home or another off-site location for all or part of the regular workweek or allows an employee to flex the time in which work is started and finished. To request consideration for a Flexible Work Arrangement, the employee must complete this Flexible Work Arrangement Form and forward it to their supervisor for their consideration and possible approval. Each Flexible Work Arrangement is unique depending on the needs of the position, department, supervisor, and employee. It is essential that both the supervisor and the employee have a clear, shared understanding of the employee's Flexible Work Arrangement.

Request Process

Employees requesting to have a flexible work arrangement must discuss the matter with their supervisor and propose a specific arrangement using the Flexible Work Arrangement Form. The supervisor should then consult with the department head/dean prior to sending it to HR for final approval.

Flexible work arrangements are approved on a case-by-case basis by supervisors and department heads/deans in consultation with Human Resources.

Flexible work arrangements may not be feasible within some departments or for certain positions within a department. Workloads also may restrict a department's ability to offer flexible schedules. Departments must have sufficient staffing every day of the workweek to meet their responsibilities.

In considering the feasibility of a proposed flexible schedule, a supervisor will consider:

- How to best serve our students
- Staffing levels needed to maintain service and production levels
- The nature of the employee's responsibilities
- The department's capacity to handle changing workloads
- The employee's work record, including performance and attendance
- Daily and weekly work schedules can be modified at the supervisor's discretion to meet changing business needs.
- Nonexempt employees may be required to depart from their flexible schedules to work overtime.

The supervisor, department head/dean, Human Resources, or the employee may discontinue the arrangement by written notification. If the FWA is terminated or modified, every effort should be made to provide as much advanced notice as possible and the final work date of the flexible work arrangement will be agreed upon by the employee, supervisor and department head/dean in conjunction with Human Resources. If the flexible work arrangement is terminated for poor performance the arrangement may be terminated immediately.

Employee Information

Date of Request:	
Employee Name:	
NKU Employee ID #:	
Job Title:	
Department:	
Work Phone #:	
Supervisor's Name:	

Proposed Work Schedule. Employees may be expected to work and be available during certain core hours. Additional work time outside of core hours may be flexible. Non-exempt staff must adhere to timekeeping and overtime policies.

Core Working Hours N/A. All work hours are flexible. Supervisor Initials _____

Week 1						
Day	Start Time		Finish Time		Location	
Monday	a.m.	p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Tuesday	a.m.	p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Wednesday	a.m.	p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Thursday	a.m.	p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Friday	a.m.	p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Saturday	a.m.	p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Sunday	a.m.	p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote

Week 2 <input type="checkbox"/> same as Week 1						
Day	Start Time		Finish Time		Location	
Monday	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Tuesday	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Wednesday	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Thursday	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Friday	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Saturday	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote
Sunday	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> onsite	<input type="checkbox"/> remote

Requested Start Date:	
Requested End Date:	

If a remote work location is being requested, please provide the location and address (including city and state) where remote work will be performed.	
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Job Duties. The general expectation for a Flexible Work Arrangement is that the employee will effectively accomplish their regular job duties, regardless of work location. If there are remote work-specific job duties and/or expectations, specify them below, or enter N/A.

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Employee Responsibilities (please initial)

- ____ I have read and understand the University's Flexible Work Arrangements procedure.
- ____ I understand that this Flexible Work Arrangement can be canceled or adjusted at any time, for any reason or for no reason.
- ____ I agree to fulfill my job duties competently, in a timely manner, and in accordance with the expectations for my position, as I would be regardless of this Flexible Work Arrangement.
- ____ I agree to maintain effective and timely communication with my supervisor, co-workers, and/or students such as is necessary and in accordance with my job duties.
- ____ I agree to establish and maintain a space conducive to productive work and maintain safe work conditions prior to beginning any Flexible Work Arrangement.
- ____ I agree to maintain accurate time reporting (including entering work, vacation, and sick time).
- ____ I agree to obtain prior management approval for overtime (if applicable).
- ____ I agree to maintain asset, data and information security.
- ____ I understand that I am liable for any injuries sustained by visitors to my remote worksite, including worksites established pursuant to this Flexible Work Arrangement (e.g., my home, etc.).
I agree to comply with all safety policies and procedures, including immediately reporting injuries sustained during working hours to my supervisor and/or any other appropriate University official.
- ____ I agree to comply with all conduct and work performance polices, regulations, and standards, including reporting requirements established under relevant policies.

- ____ I understand that as an employee I am responsible for insuring all equipment not owned by Northern Kentucky University used for remote working. I understand that the University will not be responsible for operating costs, home maintenance, property or liability insurance, or other incidental expenses (utilities, cleaning services, etc.) associated with the use of the employee's residence.

- ____ I understand that I am responsible for any tax implications of a home-based work location.

- ____ I understand that this Flexible Work Arrangement Form is limited to items outlined herein and that no additional agreements regarding employment have been created, modified, or implied through this Flexible Work Arrangement Form.

- ____ I understand that all changes in schedule must be communicated, in advance, to Human Resources to avoid problems in processing payroll.

Employee Signature

Date

Supervisor Signature

Date

Department Head/Dean Signature

Date

Human Resources Signature

Date