



ctcLink ID:	Last Name:	First Name:																								
Division/Program:	Primary Work Site:	Job Title:																								
Supervisor Name:																										
<input type="checkbox"/> New Request <input type="checkbox"/> Renewal <input type="checkbox"/> Update	Begin Date:	Review/End Date:																								
Telework Schedule																										
Schedule: <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Days:</td> <td style="width: 70%;">Start/End Time:</td> </tr> <tr> <td><input type="checkbox"/> Monday</td> <td>Work Hours: ___ / ___</td> </tr> <tr> <td><input type="checkbox"/> Tuesday</td> <td>Work Hours: ___ / ___</td> </tr> <tr> <td><input type="checkbox"/> Wednesday</td> <td>Work Hours: ___ / ___</td> </tr> <tr> <td><input type="checkbox"/> Thursday</td> <td>Work Hours: ___ / ___</td> </tr> <tr> <td><input type="checkbox"/> Friday</td> <td>Work Hours: ___ / ___</td> </tr> <tr> <td><input type="checkbox"/> Saturday</td> <td>Work Hours: ___ / ___</td> </tr> <tr> <td><input type="checkbox"/> Sunday</td> <td>Work Hours: ___ / ___</td> </tr> </table>		Days:	Start/End Time:	<input type="checkbox"/> Monday	Work Hours: ___ / ___	<input type="checkbox"/> Tuesday	Work Hours: ___ / ___	<input type="checkbox"/> Wednesday	Work Hours: ___ / ___	<input type="checkbox"/> Thursday	Work Hours: ___ / ___	<input type="checkbox"/> Friday	Work Hours: ___ / ___	<input type="checkbox"/> Saturday	Work Hours: ___ / ___	<input type="checkbox"/> Sunday	Work Hours: ___ / ___	Frequency: <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Once a month</td> <td><input type="checkbox"/> Three days a week</td> </tr> <tr> <td><input type="checkbox"/> One day every two weeks</td> <td><input type="checkbox"/> Four days a week</td> </tr> <tr> <td><input type="checkbox"/> One day a week</td> <td><input type="checkbox"/> Five days a week</td> </tr> <tr> <td><input type="checkbox"/> Two days a week</td> <td><input type="checkbox"/> Intermittent</td> </tr> </table>	<input type="checkbox"/> Once a month	<input type="checkbox"/> Three days a week	<input type="checkbox"/> One day every two weeks	<input type="checkbox"/> Four days a week	<input type="checkbox"/> One day a week	<input type="checkbox"/> Five days a week	<input type="checkbox"/> Two days a week	<input type="checkbox"/> Intermittent
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Alternate Worksite Information																										
Work Location/Address:																										



All GRC-provided equipment remains the property of **Green River College** and must be returned.

If the equipment issued to the employee changes before this form is reviewed, please update the list of issued equipment here.

List all equipment issued to the employee. State-tagged equipment *must* be recorded.

Item	Inventory Tag Number:

Job Duties, Tasks, and Work-Related Activities

The employee will perform all duties listed in the Position Description when teleworking.

Or

Outline specific duties for telework:

If additional training/development is needed, list it here as well:

Security and Confidentiality

Will the employee be using or accessing restricted or confidential data or materials while mobile working/teleworking?



YES NO

The employee has completed the following trainings or certifications

GRC Data Access Checklist

Known Telework Exceptions

Requirements for in-person attendance to specific events (such as an important training) can override regular telework work schedules. Changes to an agreed upon telework schedule require advance notice. The terms of such notice will be in accordance with College policies and procedures, relevant laws and regulations, and Collective Bargaining Agreements.

Any known exceptions to the regular telework schedule should be noted below:

Add Notice Expectations & Additional Notes Here

Statement of Understanding

The Supervisor and Employee agree to the following shared expectations:

- Determine that the employee has proper/approved IT equipment
- Ensure the employee has an internet connection sufficient to perform the duties of the position.
- Ensures all required forms for telework participation are completed and submitted to the Human Resources (HR) Office.
- Ensures that any original documents that are temporarily removed from the agency for the purposes of mobile work are handled consistent with WAC 434-615-020 and RCW 40.14
- Take any required classroom/eLearning telework training.
- If the employee must report on-site during a scheduled telework day, supervisor agrees to provide as much advance notice as possible to the employee.
- Performs the same expected quality of work while working from an alternate worksite as if they were working from their primary work site
- Ensures that internal and external customers continue to receive the same level of service while working from a remote/alternate location.



- Agrees to report to the assigned official duty station, upon request, on a mobile workday as requested by a supervisor or designee for business reasons.
 - If the request is made prior to the start of the scheduled workday, the commute is considered a regular commute.
 - If the request is made after the start of the scheduled workday, the commute is considered work time.
- Ensures the alternate worksite is free from hazardous or unsafe conditions that could cause harm to the employee.
- Agrees the alternate worksite is free from disruption
- Agrees to work on confidential assignments or hold conversations that may be confidential in nature only in a private location.
- Agrees that any College equipment is used only by employees of the agency for work purposes. Employees are responsible for the equipment and tools assigned to them and must alert their supervisor and/or GRC IT when an equipment problem or work interruption occurs.
- Agrees if a personal device is used, College data should be stored in GRC online drives. If college data is stored on a personal device, the employee may be required to surrender the personal device for investigation as part of litigation or a public disclosure request.
-
- Agrees to not meet with non-agency employees at their alternate worksite as part of College business.
- Reads, understands and complies with the requirements for the proper and allowable uses of state issued equipment as provided for in agency policy and/or any applicable collective bargaining agreement.

I understand and agree to the terms and conditions of this agreement.

Employee Signature & Date

Supervisor Signature & Date



Supervisor Approval
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Rescinded

Supervisor Signature & Date
Reason if Denied or Rescinded:

Appointing Authority Approval
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Rescinded

Supervisor Signature & Date
Reason if Denied or Rescinded:



This is a list of considerations for the employee in maintaining a safe, healthy, and secure worksite that allows efficient work.

1. The workspace is away from noise, distractions, and is devoted to your work needs.
2. There is adequate temperature, lighting, and ventilation for the workspace.
3. A fire extinguisher is located nearby.
4. First aid supplies are readily accessible and adequate.
5. The office space, hallways, aisles, stairs, and doorways are free of flammable materials, slip or trip hazards, and obstructions, permitting visibility movement and emergency egress.
6. You have an evacuation plan, so you know what to do in the event of an emergency.
7. All electrical equipment is adequate for office equipment, utilizes surge protectors, and is in good condition without exposed or damaged wiring.
8. Permanent extension cords or daisy chained surge protectors are not used.
9. Work surface and chairs are ergonomically correct.
10. Files, data, materials, and equipment are in a secure place that can be protected from damage theft and misuse.

Employee Name (Print)

Employee Signature

Date