Cal Poly Humboldt

Telecommuting Agreement Practice Sheet

 **NOTE: This is not the Agreement. Do not send this page to the employee.**

**Use this sheet to type the information that you need when filling out the agreement in Adobe Sign**

# Telecommuter Information

|  |  |
| --- | --- |
| Employee Name: |  |
| Employee ID (HSU ID): |  |
| Classification: |  |
| Department: |  |
| Telecommuting Site Address: |  |
| Work Email: |  |
| Phone #: |  |
| Telecommuting Start Date: |  |
| End Date (if Applicable): |  |

# Telecommuter Work Schedule

Mark the days that the employee is scheduled to work at the Telecommuting Site (TS) and the days he/she/they are scheduled to work on campus (OC). If his/her/their telecommuting work hours are different from his/her/their normal work hours, list them below. Work hours will be in accordance with Collective Bargaining provision(s).

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| Location |  |  |  |  |  |  |  |
| Start |  |  |  |  |  |  |  |
| End |  |  |  |  |  |  |  |

# Telecommuting Work Performance Expectations

The following is a list of the employee’s work duties under this Telecommuting Agreement with a notation of whether the duties will be performed on campus, at the Telecommuting Site, or both:

|  |  |
| --- | --- |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |