

**Policy 460 REMOTE WORK**

**APPENDIX A  
Remote Work Request**

<b>Name:</b>	
<b>Position:</b>	
<b>Location:</b>	
<b>Supervisor:</b>	

I am requesting to work remotely for part or all of my assignment for the following reason:

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My proposed remote work request parameters are as follows:

<b>Start/End Dates:</b>	
<b>Schedule (Day/Week; Times):</b>	
<b>Possible Location:</b>	

I understand that this request is subject to approval by my administrative supervisor and is pending completion of a formal remote work agreement. I also understand that if remote work is requested as a medical accommodation, I may be required to provide medical documentation supporting the accommodation and complete the Americans with Disabilities Act (ADA) interactive process.

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Employee Signature and Date