

REMOTE WORK POLICY AGREEMENT

I, _____, agree to the Remote Work policy that is located at
https://www.andrews.edu/services/hr/current_employees/handbook/employment.html#42121).

I understand that this remote work agreement will begin on _____ and this agreement is subject to termination by the VP/Dean of _____. I also understand that I am required to update my home and work address
<https://www.andrews.edu/go/myaddresses>) within 7 working days of my transition.

Remote work cannot commence until all participants have approved below.

Signed:

_____	_____	_____
Employee	ID #	Date

As the Supervisor, I understand my responsibility per the policy referenced above and will carry these out per the defined policy.

_____	_____	_____
Supervisor	ID#	Date

_____	_____	_____
VP/Dean	ID#	Date

_____	_____	_____
Human Resources	ID#	Date

HR Use Only
 Email sent to payroll for allowance (date & initial): _____