**GRANT COUNTY TELECOMUTE REQUEST ARRANGEMENT**

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason to telecommute: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My position is: [ ] Salary [ ] Hourly

My telecommute work arrangement will begin on (effective date): \_\_\_\_\_\_\_\_\_\_\_ and end on \_\_\_\_\_\_\_\_\_\_\_\_

I will work at the following home location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*I have ample space for a designated workstation, (i.e., chair, table, desk, etc.), to place my equipment and is conducive for working comfortably and safely.*

I will work from home \_\_\_\_\_\_\_\_ days per week or \_\_\_\_\_\_\_\_ hours per week.

My specific weekly schedule will be: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My work hours will be from \_\_\_\_\_\_\_\_ a.m. to \_\_\_\_\_\_\_\_ p.m.

I can be contacted by the following phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] County provided cell phone [ ] Personal phone number

1. I will test telecommuting by accessing my home network/wireless and connecting to the Grant County VPN.
2. It is the employee’s responsibility to insure that the virtual desktop infrastructure (VDI) works properly at their workspace.
3. Grant County **requires** no less than 15 Mbps internet connection and recommends 25 Mbps per speeds shown by fast.com.
4. Grant County does not recognize Hughes Net, VIACom, hotspots, or tethering as internet service providers that are compatible with telecommuting. If discovered these are being used, the telecommute agreement will be voided and employee must return to the workplace.
5. If discovered that the Fast.com report is shown to be incorrect, or falsified, the telecommute agreement is voided and will result in discipline leading up to and/or include termination of employment.

I understand the requirements as stated above. My Internet Service Provider is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I will be using county-owned equipment, at the work location shown above and understand that I am responsible for said equipment, as stated in the County’s Remote Work Policy.

Note: If technical support is needed with county owned hardware and/or software, please create a ticket with the Grant County IT Helpdesk. Information Technology Department will not be able to support your home network / wireless / Internet.

I understand and agree to the job assignments or tasks to be completed under my remote work arrangement with my supervisor. (Supervisors may attach a specific written statement of job assignments and additional expectations if desired).

Employees are reminded during working hours they must comply with all existing policies as defined in the Grant County Employee Handbook including meal/break periods, confidentiality, and electronic communications. Work hours are not expected to change during the telecommuting program. Non-exempt Employees are required to track all work hours in accordance with County policy. If overtime is anticipated, non-exempt Employees must obtain prior approval from their Department Head or direct supervisor prior to accruing overtime in accordance with County policy.

Employee agrees to defend, indemnify and hold harmless the County, its affiliates, employees, contractors and agents, from and against any and all claims, demands or liability (including any related losses, costs, expenses, and attorney fees) resulting from, or arising in connection with, any injury to persons (including death) or damage to property, directly or indirectly, by the services provided herein by Employee or by Employee’s willful misconduct, negligent acts or omissions in the performance of the Employee’s duties and obligations under this Agreement.

All County policies, including those relating to job performance, remain in effect. That means that Employee’s performance will be monitored by his or her manager and Employee will be expected to comply with any and all productivity and quality standards that are applicable to Employee in the office. Disciplinary action, up to and including termination of employment, may result for failure to meet established or expected performance standards

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*By signing below, I am indicating I have read and received a copy of the October 2022 updated Grant County Remote Work Policy and agree that the work schedule complies with Grant County policies and procedures, Fair Labor Standards Act (FLSA), and state regulations. I understand this Remote Work arrangement may be terminated at any time by my employer.*

*I further understand that inappropriate internet or county computer use found while monitoring or servicing county property will be reported immediately to the department head for further investigation. This includes personal shopping sights, personal social media, personal email, etc.*

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**Approval:**

Supervisor Signature: Date:

Department Head Signature: Date:

IT Director Signature: Date:

**A signed copy of this form must immediately be sent to the Grant County Personnel Department for tracking purposes. (via fax, email, drop off, etc.)**