

# TELEWORK AGREEMENT

The following constitutes an agreement on the terms and conditions of telework between:

The "Company Name" and \_\_\_\_\_, ("employee."). Employee and "Company" agree to all terms herein. All terms of "Company" policy # "teleworking" are hereby incorporated into this Agreement by reference.

## I. Policy:

Please refer to "Company" policy "# Teleworking. Employees agrees to comply with all "Company" rules and policies, including, but not limited to, those listed in the "Company" Employee Handbook and those incorporated in this agreement.

## II. Alternative Worksite

1. Safety—Employees are expected to follow the same safety rules as are in place for "Company's" headquarters office. Teleworking employees are covered by "Company's" worker's compensation insurance for work related injuries that occur at the alternative worksite while performing "Company" work activities. Employee should follow "Company" policy for reporting any injuries that occur while teleworking.
2. "Company" is not liable for injuries sustained by others in an alternative worksite. Teleworking employees are strictly prohibited from having "Company" shipments sent to their alternative worksite. Employees are further prohibited from using their alternative worksite as a "Company" meeting venue. Violations of these policies will result in employees telework privileges being terminated.
3. "Company" will not pay for costs associated with initial setup or maintenance of your home workspace.
4. Technology/Equipment – Employees should use company issued laptops while teleworking. "Company" will not pay for additional technology accessories for use at your alternative worksite (docking stations, cell phones, larger monitor, etc.) nor will "Company" pay for ongoing cost and/or maintenance of such items. Before purchasing any items for use with "Company" equipment, employee must have such items approved by the "Company" Network Administrator.

## III. Telework Schedule

Regular and recurring (without a compressed schedule) – The employee consistently teleworks one (1) day per week from the alternate worksite location(s) documented in this agreement. Deviations from this telework schedule must be approved by supervisor.

- ☐ Regular and recurring (with a compressed schedule) – The employee consistently teleworks bi weekly: one (1) day during non-compressed work schedule week, from the alternate worksite location(s) documented in this agreement. Deviations from this telework schedule must be approved by supervisor.

Please specify the day of the week you will telework: \_\_\_\_\_

- ☐ No scheduled telework day on a consistent basis. Employee is establishing approval to telework to be used on an as need basis only. A minimum of 24 hours' notice must be given to supervisor. Approval for each telework instance will be made at the sole discretion of the supervisor.

#### IV. Work Location

1. Employee's Central Workplace is: 4300 Wilson Blvd., Ste. 800, Arlington, VA 22203
2. Employee's alternate work location and contact number is:

\_\_\_\_\_  
\_\_\_\_\_

#### V. Amendment or Termination of Agreement

This agreement is not a guarantee or contract for employment and shall not be construed as such. This Agreement can be terminated or modified at any time by "Company". Employee may withdraw from their teleworking agreement at any time. If employee withdraws from this agreement you will be required to resume your regular work schedule conducting your work at the central "Company" office. "Company" will not be liable for any costs, damages or losses resulting from any termination of the teleworking policy in general or for termination of this agreement as applied to employee.

A copy of this agreement will be provided to the employee and placed in the employee's personnel file.

I have read the "Company" Teleworking Policy and the terms of this Telework Agreement and I hereby agree to be bound by their terms.

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

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

Supervisor Signature: \_\_\_\_\_

HR Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Employee has participated in the teleworking program for 90 Days. Employee's signature below indicates an interest in continued participation in the teleworking program. Supervisor's signature below indicates approval for employee to continue participation in the teleworking program under the terms of the "Company" teleworking policy and this agreement.

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

Employee Supervisor: \_\_\_\_\_