

CLAREMONT GRADUATE UNIVERSITY TELECOMMUTE AGREEMENT

Name of Telecommuter: _____

Effective Date: _____

Week Day of Telecommute: _____

Supervisor: _____

The parties above agree as follows:

1. This is a voluntary program and available for a maximum of one day per week.
2. Employee agrees to be available via telephone at all times during the work day.
3. Employee agrees that all of the tasks, duties, obligations, responsibilities, and conditions of employment will not be changed by reason of participation in the telecommute program, except for those specific changes set forth in this Agreement.
4. Employee agrees to establish and maintain a designated work space at his/her place of residence for the telecommute, which work space shall be maintained in a safe condition, free from hazards and other dangers to the employee. Employee agrees that CGU shall possess the right to make on-site inspections on reasonable notice for the purpose of determining whether or not the employee is maintaining the work space in accordance with this Agreement.
5. Employee agrees and fully understands that CGU's workers compensation liability will only apply to the area in the employee's residence which has been approved and used as a "designated work space."
6. In the case of an injury while working at home, the employee will immediately report the injury to his/her supervisor to get instructions for obtaining medical treatment.
7. Employee agrees to incur all expenses related to the establishment and use of designated work space in his/her place of residence.
8. Employee agrees that telecommuting is not a substitute for child care and agrees to have someone else care for the children during the telecommute program.

9. The employee will also not undertake to provide primary care for an elderly adult, who would otherwise require the care of a nurse, while working at home.
10. Employee agrees that his/her total work hours, compensation, and vacation schedule will not change by virtue of participation in the telecommute program.
11. Employee agrees and understands that s/he is obligated to comply with all CGU rules, policies, practices, and instructions which apply to his/her job and any others specified in this agreement.
12. Restricted-access materials, such as payroll, records, will not be taken home without the written consent of the employee's supervisor.
13. Employee agrees to keep a copy of this Agreement on file with the Director of Human Resources.

I affirm by my signature below that I have read and understand this Agreement. I hereby agree to accept all of the conditions of this Agreement.

Employee's Signature Date _____ **Date:** _____

APPROVAL

Approved by: _____ **Date:** _____

Supervisor's Signature

Authorized by: _____ **Date:** _____

Senior Officer Signature Date