



## NMT Agreement for Flexible Work, Hybrid, or Remote Work

The form constitutes an agreement on the terms and conditions of flexible or remote work away from NMT sites. This agreement specifies the conditions applicable to an arrangement for performing work, either part-time, or entirely at an alternate work location, on a regular basis.

This agreement is at the discretion of the supervisor and department chair/director and is subject to ongoing review. Deans or Division Vice Presidents may communicate standards for equitable implementation across departments to maintain business continuity. This agreement is subject to modification or termination at any time based on employee performance or NMT business needs. Effort should be made to provide a two-weeks' notice by either party.

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### Employee Information

Name: (Last, First): \_\_\_\_\_ Title: \_\_\_\_\_

Department: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Job Status: \_\_\_\_\_ Agreement Type: \_\_\_\_\_ Hybrid \_\_\_\_\_ Remote

### Alternative Work Location Information

Alternative Work Location Street Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Distance from NMT campus: \_\_\_\_\_ miles \_\_\_\_\_ commute time

Start Date: \_\_\_\_\_ End Date: (if applicable): \_\_\_\_\_

Review Period: \_\_\_\_\_

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Days and hours when working off-site (if hybrid or remote only)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start Time							
End Time							

**Work Plan and/or Flexible Work Schedule**

The following work plan outlines the agreed upon standards for work at the alternate site, the communication requirements, office coverage, electronic meeting protocols, how assignments will be received and returned, phone coverage, and reporting to the supervisor.

**Work Schedule**

I agree to maintain regularly scheduled and approved work hours and to be fully accessible during those hours. I am an exempt employee, I agree to be available during specific agreed-upon hours.

I understand that schedule changes may be made at the discretion of my supervisor.

I agree to obtain prior approval from my supervisor before working overtime (non-exempt employees only).

I agree to accurately report work hours and strictly adhere to required rest and meal breaks in full compliance with policies and federal and state guidelines (non-exempt employees only).

I understand that I may be required to work hours at the NMT worksite or temporarily revise the work schedule, for business reasons or continuity at the discretion of my supervisor.

**Policies**

I agree that I am expected to maintain a level of productivity, performance, communication, and responsiveness that would be considered standards for working at a regular NMT worksite.

I agree to adhere to the plan agreed upon with my supervisor outlining the standards for work at the alternate site including work schedules, communication requirements, electronic meeting protocols, how assignments will be received and returned, phone coverage and reporting to my supervisor.

I understand that my supervisor reserves the right to assign other work, as necessary at any worksite.

I understand that job responsibilities, standards of performance, and performance reviews will occur as if I were at a regular NMT worksite.

I agree to maintain a presence and be available to my supervisor, coworkers, direct reports and customers with the same response times as if at a regular NMT worksite.

I agree to maintain contact when remote working and will notify my supervisor, coworkers, and customers of any changes in my posted work schedule.

**Work Environment**

I am responsible for ensuring a worksite environment suitable for accomplishing my regular job duties during scheduled hours of work and, if needed, arranging for appropriate dependent care.

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## **Safety**

I agree to maintain a safe, ergonomically sound, and secure work environment at my own expense.

I agree to report any work-related injury to my supervisor at the earliest opportunity, and I agree to hold NMT harmless for injury to others at the alternate worksite.

I agree not to conduct in-person work-related meetings at the alternate worksite.

## **Reimbursable and Unallowable Expenses**

I understand that working from home or other alternate locations is not on travel status and eligible for reimbursements of any type including travel, meals, per diem, etc.

I understand that reimbursement for the business use of a phone or similar device purchased by the employee will not be reimbursed by NMT.

I understand that other expenses including utilities, rent, furniture, etc. will not be reimbursed by NMT.

I understand that if I am working remotely part of the workday and another part of the workday is at the NMT office, the time in between that is used for the commute is not compensable time.

## **Equipment / Records /Security**

I understand that I am responsible for the safety and security of NMT-owned equipment, records and materials.

Private/restricted (as defined in FERPA and HIPAA) information should not be shared or left visible/accessible within the household or workspace. While not in use, these documents should reside in a locked desk, file cabinet, etc.

I understand the NMT will provide for repairs to University equipment when damage to that equipment is incurred during the course and scope of my job duties and during my work hours.

I agree that I will maintain reliable and secure network connection to support my work activities.

I agree to return NMT equipment to NMT for inspection, repair, replacement, or repossession when requested by my supervisor or upon termination of this agreement or my employment.

For employees working on site, but working alternative schedules, please submit schedules to Human Resources for the file. Also, indicate the alternative, flexible schedule on this work plan document.

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**Other**

I understand that I am responsible for all tax and/or insurance consequences, if any, of this arrangement and for conformance to any and all laws and regulations, local, state and federal. I recognize that I am obligated to consult my own legal tax professional should I need to.

**I hereby affirm by my signature that I have read this Agreement for Flexible, Hybrid or Remote Work and I understand and agree to all the provisions herein.**

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<b>Employee Signature</b>	<b>Print Name</b>	<b>Title</b>	<b>Date</b>
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<b>Supervisor Signature</b>	<b>Print Name</b>	<b>Title</b>	<b>Date</b>
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<b>Vice President/Director Signature</b>	<b>Print Name</b>	<b>Title</b>	<b>Date</b>
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