

Office of Human Resources
Employee Remote Work Request Form

(Please return the completed form to the Office of Human Resource via humres@hartwick.edu)

Employees who wish to request a temporary remote work arrangement should complete this form and provide it to their supervisor. Supervisors will ensure essential job functions, departmental operations and office coverage are considered before requests are approved. Supervisors must work with the Office of Human Resources for requests that may be health or COVID-19 related.

Temporary Remote Work Option – Employee Completes

Employee Name: _____

Department: _____ Title: _____

Start Date: _____ End Date: _____

Please provide a reason for this request:

Please provide details about how you will complete your work effectively under this requested arrangement:

Please provide a detailed plan that outlines how communications will occur with supervisor, co-workers, students and other community members:

I understand that Hartwick College may modify or suspend the temporary remote work arrangement at any time.

Employee Signature: _____ Date: _____

Adjusted Work Arrangements – Supervisor Completes

Supervisor Name: _____

Approved Start Date: _____ Approved End Date: _____ Not Approved: _____

Supervisor Comments:

Supervisor Signature: _____ Date: _____

VPAA/Provost Signature (for faculty requests only) _____ Date: _____

Human Resources Signature: _____ Date: _____