# SUMMER SCHEDULE TEMPORARY VIRTUAL WORK AGREEMENT for Full-Time, Non-Faculty Employees - *Effective Dates: May 30, 2022 – June 30, 2022*

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| --- | --- | --- | --- | --- |
| **Employee Name/Title:** | | | **Supervisor Name/Title:** | |
| **EMPLOYEE ID (LOLA#):** | | **Dept:** | **Biweekly Virtual Schedule: (limit 1 virtual workday per week)** | |
| * M ☐ T☐ W ☐ Th **(required 3 onsite workdays)** | |
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| **COMPLETED BY SUPERVISOR – Describe/list employee’s job duties to be performed during virtual work days:** | | |
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**AGREEMENT REQUIREMENTS:**

* Supervisor and employee have discussed and confirmed job duties above can be performed virtually, while maintaining optimal productivity and without interruption to College operations.
* Employees remain responsible for the 40-hour Monday through Thursday summer schedule work week during the effective dates, and they are responsible for 10 hours of work (or the number of regularly scheduled work hours) for each virtual work day. All offices must maintain at least 80% in-person staffing.
* All offices must set performance goals for their areas, as approved, which will be monitored weekly.
* Employee and supervisor must certify employee has performed the virtual duties described above in accordance with their time worked reported and approved via their biweekly web time entry/timesheet.
* Employee must perform all virtual work at official home address on file with Human Resources, and any exceptions during the agreement period must be documented and approved by the Supervisor.
* Supervisor and employee have confirmed employee has appropriate space, equipment, phone, and Internet access to perform the above duties virtually, without creating an information security risk for the College.
* Supervisor must provide adequate supervision/monitoring of performance to ensure productivity of all work
* Supervisor and employee have thoroughly reviewed and discussed the *Temporary Virtual Work Guidelines.*
* Supervisor and employee certify they have read, understand, and agree to abide by the *Summer Schedule Temporary Virtual Work Procedures for Full-Time, Non-Faculty Employees* in effect at the time of this agreement, and any deviation from this agreement must be justified and approved in writing by the supervisor.

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CERTIFICATION SIGNATURES: \*\***Signatures may be provided via hard-copy signature, scan, or electronic means.\*\*  
**At Beginning of Agreement Period:** *I certify that I agree and will abide by the requirements above.*

Employee’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Upon Completion of Agreement Period:**  
**EMPLOYEE:** *I certify that I have performed the virtual work duties toward the performance goals described in this agreement during the time reported via my biweekly web time entry and I have abided by all the requirements above.*

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

**SUPERVISOR:** *I certify that I have sufficiently monitored the employee’s productivity toward the performance goals during this agreement period; the employee has performed the job duties in accordance with their time as reported and approved via biweekly web time entry; and I have abided by all requirements of this agreement.*   
  
Supervisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Approved 5/19/22*