

## REMOTE WORK POLICY AGREEMENT

*(for regular, benefited positions only)*

I, \_\_\_\_\_, agree to the Remote Work policy that is located at  
([https://www.andrews.edu/services/hr/current\\_employees/handbook/employment.html#42121](https://www.andrews.edu/services/hr/current_employees/handbook/employment.html#42121)).

I understand that this remote work agreement will begin on \_\_\_\_\_ and this agreement is subject to termination by the VP/Dean of \_\_\_\_\_. I also understand that I am required to update my home and work address

(<https://www.andrews.edu/go/myaddresses>) within 7 working days of my transition.

Remote work cannot commence until all participants have approved below.

Signed:

_____	_____	_____
Employee	ID #	Date

As the Supervisor, I understand my responsibility per the policy referenced above and will carry these out per the defined policy.

_____	_____	_____
Supervisor	ID#	Date

_____	_____	_____
VP/Dean	ID#	Date

_____	_____	_____
Human Resources	ID#	Date

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HR Use Only

Email sent to payroll for allowance (date & initial): \_\_\_\_\_