

**EMPLOYEE REQUEST FOR ALTERNATIVE WORK / REMOTE WORK SCHEDULE**

(City of Tumwater Personnel Policy 4.03 Alternative Work Policy)

(City of Tumwater Remote Working Policy)

Employee Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Request Submitted:\_\_\_\_\_\_\_\_\_

Department/Division:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Proposed Effective Date:\_\_\_\_\_\_\_\_\_\_

Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Overtime Status (check one): \_\_\_\_\_\_\_ Not eligible for Overtime Pay

 \_\_\_\_\_\_\_ Eligible for Overtime Pay

Requesting: \_\_\_\_\_\_\_\_ Alternate Work Schedule

 \_\_\_\_\_\_\_\_ Remote Work Schedule

 \_\_\_\_\_\_\_\_ Alternate and Remote Work Schedule

*Please attach separate sheets as needed to provide a full response to each question.*

1. Describe the proposed Alternative and/or Remote Work Schedule by completing the chart(s) on the other side of this form.

2. Do you propose this schedule to be year round or seasonal?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 If you are proposing the schedule seasonally, please list the beginning and end date for the schedule:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. How will this proposed schedule impact your immediate co-workers and what steps do you propose to deal with the impacts? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. How will this proposed schedule impact other departments and/or city customers and what steps do you propose to deal with the impacts?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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5. How do you propose to handle your telephone calls when you are not in the office during regular city operating hours?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposed Flex Schedule Letter \_\_\_\_\_\_\_\_\_\_\_\_ (**[**Shift Schedule**](file:///%5C%5Ctumwater.local%5Cdfs%5Cdata%5CShared%5CASD%5CHuman%20Resources%5CFlex%20Time%5CAlternate%20Shift%20Schedules.xls)**)**

**Scheduled remote work days:**

□ Monday □ Tuesday □ Wednesday □Thursday □Friday □Saturday □Sunday

**WEEK #1**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Sun. | Monday | Tues. | Weds. | Thurs. | Friday | Sat. |
| Start /StopTimes |  |  |  |  |  |  |  |
| LunchStart/Stop |  |  |  |  |  |  |  |
| TotalHoursWork |  |  |  |  |  |  |  |

**WEEK #2**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Sun. | Monday | Tues. | Weds. | Thurs. | Friday | Sat. |
| Start /StopTimes |  |  |  |  |  |  |  |
| LunchStart/Stop |  |  |  |  |  |  |  |
| TotalHoursWork |  |  |  |  |  |  |  |

Employee Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Review and Approval By:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City Administrator Review and Approval:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_