MoDOT Telework Agreement Form

Name:	Date:
Title:	District/Division/Office:
Supervisor:	Current Non-Telework Work Location:

The approval of a telework arrangement is based on position eligibility, employee suitability, and assurance of a sustained or improved positive customer experience. The department retains the right to modify or terminate a telework arrangement if it is determined it is no longer a benefit to the organization, the employee is not meeting the established performance measurements for their job, there is a decrease in quality or quantity of work, or decreased customer service. MoDOT will attempt to provide ample notification to the employee if the need to modify or terminate a telework arrangement, that results in a temporary modification to this agreement, does not require a resubmittal of this agreement and other documents.

Directions:

Step 1: Employee reads Personnel Policy 0513, "Telework".

- Step 2: Employee completes the MoDOT Telework Worksite Safety Checklist.
- Step 3: Employee completes and signs section "A" of this form.
- Step 4: Employee forwards both the completed MoDOT Telework Worksite Safety Checklist and this form with section "A" completed to their immediate supervisor.
- Step 5: Supervisor completes section "B" and if both supervisor and district engineer/division leader/state engineer agree the position is eligible and employee is suitable, both will sign section "B" of this form and proceed to step 6. If the supervisor and/or district engineer/division leader/state engineer does not agree that either the position is eligible or the employee is suitable, proceed to step 5a outlined below.

5a - If the supervisor and/or the district engineer/division leader/state engineer does not agree that either the position is eligible or the employee is suitable, they must send the MoDOT Telework Safety Checklist and this form to Central Office Human Resources (HR) (hremp@modot.mo.gov) for additional review(s). This additional level of review(s) of the employee's telework agreement must take place <u>before</u> an employee is advised their agreement has not been approved. Once a final review has been conducted by Central Office HR and others involved in the review process, the supervisor and district engineer/division leader/state engineer will be notified and given instructions regarding proper written notification to the employee. Appeals for denials are to be filed in writing by the employee directly with the Chief Administrative Officer (CAO), Missouri Department of Transportation, P. O. Box 270, Jefferson City, Missouri 65102 within 30 calendar days of receipt of the written notification of denial.

Step 6: Supervisor and employee will complete section "C" together and sign this form. The supervisor will send one copy to CO HR and retain one copy for their files.

Section A

<u>To be completed and signed by the employee and submitted to immediate supervisor along</u> with MoDOT Telework Worksite Safety Checklist.

Worksite/Schedule

a. MoDOT work location _____

(Specify employee's assigned MoDOT work location)

- b. Day(s) and hours of scheduled work week the employee is expected to work from their MoDOT work location:
- c. The telework worksite ______

(Specify employee assigned alternate non-MoDOT work location)

d. Days and hours when the employee will work at the telework worksite

e. Telework start and end date: _____

(Start date)

(End date)

Note: Changes to the work schedule, including additional hours involving overtime and flex time at any worksite, must be approved in advance by the supervisor. Requested annual leave, sick leave, flex time and overtime shall be requested and approved by the supervisor following the standard procedures for the work unit.

MoDOT-Provided Equipment/Supplies/ Documents/Files

Please list/describe all MoDOT-provided equipment, supplies, and documents/files (*) that will be located at the telework site: (MoDOT items such as desks, chairs, stand-up desks, printers, or other like equipment are prohibited from being taken to the telework site.)

*Department	equipment,	supplies,	and	documents/files	are	the	property	of	MoDOT	and a	ll items	; in	the
employee's po	ossession mu	st be retur	ned i	mmediately if em	ploy	men	t should e	nd	for any re	eason.			

(Employee Signature)	(Printed Name)	(Date)

Section B

To be completed and signed by immediate supervisor and district engineer/division leader/state engineer. All boxes must be checked for approval. If supervisor or district engineer/division leader/state engineer does not agree that either the position is eligible or the employee is suitable, they must forward employee's Telework Worksite Safety Checklist and this form to CO HR (hremp@modot.mo.gov) for additional review(s).

Position Eligibility – a position is eligible if, with respect to that position:

□ There is no required direct physical contact with the public, or other state agencies, during the telework period.

□ The work can be done with little to minimal direct supervision during the telework period.

□ The position holder is not required to be physically present at a MoDOT work location, (e.g., office or maintenance building) on a daily basis or use equipment located at the MoDOT work location.

Employee Suitability – an employee is suitable if:

□ The employee has not been subject to disciplinary action (written warning or higher) within the last 12 months.

□ The employee does not have documented issues with performance or accountability.

□ The employee does not have documented issues with their ability to safeguard files, documents, equipment, and supplies, and maintain confidentiality of work.

□ The employee does not have documented issues with organization, self-motivation, and proactiveness.

□ The employee does not have documented issues with working independently without direct supervision, meeting deadlines, and managing distractions.

□ The employee does not have documented issues with proficiently using department required technology.

District/Division/Office Specific Provisions (if applicable)

(Supervisor Signature)	(Printed Name)	(Date)	
(District Engineer/Division Leader/ State Engineer or designee's Signature)	(Printed Name)	(Date)	

Section C

To be completed together by employee and supervisor prior to final approval.

□ Supervisor has explained that the employee's job responsibilities, expectations, preferred employee qualities list, and standards of conduct (e.g., professionalism, confidentiality), including compliance with MoDOT's policies and values, are the same regardless of where the team member is working.

□ Employee agrees to acknowledge all non-emergency communications within a timely fashion when not on leave.

□ Employee agrees to be available during their work hours. If they are unavailable, they must communicate their unavailability to their supervisor, customers, and other stakeholders prior to being unavailable.

□ Employee agrees to keep their out-of-office messages up to date when they are on leave.

□ Employee agrees to keep their department calendars up-to-date and shared with applicable team members.

□ Employee agrees to forward their office phones when teleworking. It should not be noticeable to internal and external partners that the employee is working outside of the office.

□ Employee agrees to attend in-person meetings as required by their supervisor.

□ When participating in virtual meetings, employees with video capability agree to have their video on when required by their supervisor.

□ Employee agrees they will not be the primary caregiver for any dependent or other person during the time they will be teleworking.

□ Employee has completed all required training courses listed below:

- □ Remote Work Foundations
- □ Building Relationships While Working from Home
- □ Working from Home: Strategies for Success

□ Supervisor has completed all required training courses, as listed below:

- □ Leading at a Distance
- □ Managing Virtual Teams
- □ Leading Remote Projects and Virtual Teams
- □ How to Build Virtual Accountability

I hereby affirm by my signature that I have read/completed the MoDOT Telework Policy, MoDOT Telework Worksite Safety Checklist, and this MoDOT Telework Agreement and understand and agree to all of its provisions. My signature below indicates that this MoDOT Telework Agreement is true and accurate to the best of my knowledge. I further understand that any intentional inaccuracies found in this MoDOT Telework Agreement may be grounds for disciplinary action, up to and including termination.

(Employee Signature)

(Printed Name)

(Date)

(Supervisor Signature)

(Printed Name)

(Date)

Supervisor must retain this original form and provide one copy, along with the Telework Worksite Safety Checklist, to their local Human Resources office and one copy to Central Office Human Resources, Employment Section.