UNIVERSITY OF HARTFORD

FLEXIBLE or REMOTE WORK SCHEDULE PROPOSAL

	Emplo	oyee Name:	Supervisor Name:					
	Job T	itle:	Date Submitted:					
	Depai	rtment:	□ Non-Exempt □ Exempt					
	UHart	ID:	Hours/Week: □ 35 hours □ 40 hours					
			V COLLEGIUS DECLISOTED					
		PART I: FLEXIBLE WORK SCHEDULE REQUESTED						
		Remote/Telework Schedule						
		Variable Hour Work Schedule	Work Schoolule (alia to Dout IVA					
		PART II: PROPO	SED SCHEDULE					
Ple	ase de	efine the requested work schedule (e.g., 8 a.m. to	5 p.m. remote; 7:30 a.m. to 4:30 p.m. campus)					
Мо	nday:							
Tue	esday:							
We	dnesd	lay:						
Thu	ursday	·	. 					
Fric	day:							
Du	ration	of Requested Schedule (minimum 2 months, ma)	kimum 6 months):					
		·	unpaid meal break: 30 minutes 1 hour					
па	ррпса							
		PART III: WORK 1550E	S TO BE CONSIDERED					
Но	w will	this proposed flexible work schedule sustain	or enhance my ability to get my job done?					
		PART IV: EMPLO	YEE SIGNATURE					
in t	hat po	olicy. I understand that it is my responsibility to	e policy and agree to the terms and conditions set forth o make my flexible work schedule a success and that he right to discontinue my flexible work schedule at e.					
	_	Employee Signature	Date					

	PART V: SUPER	RVISOR AUTHO	ORIZATION	
have reviewed this f	lexible work schedule prop	oosal with the emplo	yee.	
	This proposal is	Approved	Denied	
f the proposal is deni employee:	ed, identify the business r	easons that support	the denial and return th	e proposal to the
lote to Supervisor:	Do not forward a denied	d proposal to HRD.		
Super	visor Signature	Extension	Date	
	attendance records have	been reviewed and	supervisor authorization	n confirmed.
A	uthorized HRD Representative		Date	
				Revised 6/202