Classified Employee Request for Remote Work Schedule

Name:	Supervisor:
Job Title:	Date of Request:
Department:	Effective Start date:

Please contact the Benefits & Leave Analyst in the HR department for medical leave accommodations. For one-time requests, please contact your superviso.R) (onepdatiac.i.2).G6n) 6n one-

[ ]bUder Article 7I request a hybid schedule to orkemotely for more* than 6f my assiged ork week(.e. 6hour orkeekmore than 6hours teleork

*In addition *Vice President of Human Resources Byature   Bte

[ ]Approved [ ]Denied

Comments:

_____

_____

_____

Denied requests for a hybrid schedule may be appealed to the area Vice President, the Vice President of Human Resources, and CSEA.