



Converse Telework Agreement

Employee Name: _____

Employee Title: _____

Department: _____

Supervisor Name: _____

Proposed Start Date: _____ through _____.

EMPLOYEE CERTIFICATION

1. I understand that my duties, obligations, responsibilities and the terms and conditions of employment with Converse remain unchanged except those obligations and responsibilities specifically addressed in this agreement. My salary and benefits will remain unchanged with my teleworking. I understand that this agreement does not constitute an employment contract.
2. I understand that this agreement is voluntary and may be revoked or modified by Converse or me at any time for any reason. I understand that this agreement does not create an entitlement to continued teleworking. If the agreement is terminated, a reasonable time will be given for me to transition back to the worksite.
3. I understand that Converse will review this agreement after a trial period of [6] months and may in its discretion, revoke or modify this agreement at that time.
4. I understand that tax and other legal implications for the business use of the employee's work site are based on IRS and state and local government restrictions. I agree that all applicable taxes (including income tax and social security taxes) will be withheld based on my employment at Converse in South Carolina, not on the location from which I telecommute. I agree that I am responsible for tax consequences and other legal implications that may occur, including local zoning restrictions.
5. I agree that I will not be the primary care provider for any dependent during my work hours and I will make regular dependent care arrangements during teleworking periods. Appropriate leave must be taken for external responsibilities that conflict with scheduled remote hours. If external responsibilities consistently conflict with remote duties, please consult with Human Resources to determine FMLA eligibility. Please follow leave guidelines as determined by Converse Office of Human Resources.

6. I agree that my total number of work hours will not change due to my teleworking and that I will continue to be responsible for reporting my time as required by department and Converse's procedures. I am still eligible for all scheduled holidays, vacation time, summer flex hours and when applicable professional development.

7. I agree that my work hours, overtime compensation, use of sick leave, approval for use of vacation and requests for a Leave of Absence will conform to Converse's policies and procedures, departmental guidelines, and to the terms otherwise agreed upon by my supervisor and me.

8. I agree that I will be required to travel to Spartanburg at least [4] times each year for department meetings/ events. I understand that travel/mileage related to Converse business will be approved and expensed through Converse.

9. I agree to maintain a safe and secure work environment and to designate a remote workspace to accommodate any equipment to be used in my work. I will protect the workspace from any hazards and dangers that could foreseeably affect the equipment and me.

10. I agree to report work-related injuries to my supervisor and the Converse HR within 24 hours or at the earliest reasonable opportunity. I agree to hold Converse harmless for injury to others at the off-campus work site.

11. I agree to restrict the use of Converse-provided equipment and supplies located in my remote work site to the same policies that apply to equipment on campus.

12. I agree to implement all computing security measures required for the classification level of data with which I work. I am responsible for implementing and complying with the requirements set forth in the Converse handbook. I understand that these requirements include:

- a. Ensuring that Converse-provided anti-virus and anti-spyware subscriptions are kept current, and promptly notifying CT of any warning messages stating they are not current.
- b. Ensuring that proper protection of computing resources at the remote location is in place. Any wireless connection must be encrypted using a wireless encryption protocol or by connecting to the Converse VPN client.

13. I agree to notify CT immediately if symptoms of a virus or spyware infection occur.

14. I agree to maintain the security and confidentiality of materials I access as part of my employment, and to abide by Converse's policies for employees, including those covering information, security, software, software licensing and data privacy, conflicts of interest, outside employment, ethics, conduct as well as the requirements of applicable state and federal government statutes.

15. I agree not to download any Converse data or information onto my personal computer or onto any computer provided by Converse in my possession. I agree that unencrypted information will not be stored on the local disk drive of my computer. It should be stored on a server and accessed through the Converse VPN, or encrypted with proper provisions made for recovery. Notwithstanding the above, I agree that I will promptly notify CT if a computer or storage device containing Converse information is stolen or lost.

16. I understand that all equipment, information, documents records and materials provided by my department or Converse remain the property of Converse. I also understand that any information or

documents used or created by me in the performance of my work assignments are the property of Converse; however, copyright to my photo images is not transferable.

17. I understand that office supplies will be provided by Converse as needed and that any out-of-pocket expenses for other supplies will not be reimbursed unless I have the prior approval of my supervisor.

18. I agree to return Converse equipment, records and materials with seven (7) days of termination of this agreement. All Converse equipment will be returned by me for inspection, repair, replacement or repossession within seven days written notice.

19. I agree to be available during the assigned business hours, as stipulated in this agreement, for communication by phone, voice mail, email, etc.

I have read the contents of this Teleworking Agreement. I certify that I will abide by all of the requirements of this Agreement.

Employee's signature: _____ Date: _____

Reason for the Request:

Teleworking Schedule (Please complete):

- 100% Teleworking
- Teleworking and On-Site Work

Please provide proposed work schedule (days and hours) on and off site:

Remote Work Location and Contact Information:

Is this the Employee's residence? : Yes No

Phone Number: _____

Fax Number (if any): _____

Equipment to be provided by Converse (Please contact CT to discuss security measures and software/hardware requirements).

Please describe equipment and provide serial numbers: _____

APPROVALS

Based on a review of suitable considerations, we have concluded that teleworking is appropriate under the circumstances. The above-named employee is granted approval to participate in accordance with the agreement set forth above.

Supervisor's approval: _____ Date: _____

Department Head's Approval: _____ Date: _____

Human Resources Approval: _____ Date: _____

Please submit the completed form to Human Resources, HR@converse.edu. Teleworking cannot begin until the signed Remote Work Agreement is on file with Human Resources.