



COUNTY OF NEVADA

FLEXIBLE WORK SCHEDULE and/or TELEWORK SCHEDULE REQUEST/AGREEMENT

You may use this form to request one or both types of schedules. An employee may have both a FWS and a TW schedule, or just one or the other. When directed to telework, complete the telework portion of the form according to required schedule.

Employee: _____

Supervisor: _____ Department: _____

- Check one or both: [] Request for Approval or Modification of Flexible Work Schedule ("FWS") (pages 1-2 apply to FWSs)
[] Request for Approval of Telework ("TW") Schedule (either on-going or episodic) (pages 3-4 apply to TW)
Or: [] I am completing this form because I have been directed to Telework (complete the Auditor's Stipend Form.)

FWS: Effective at start of TWO pay periods from this date: _____
FWS: Effective at this custom date (which also must be the start of a pay period): _____

[] Four 10-hour days ("4-10" Option):
Hours of work: _____ to _____
Regular Day Off (RDO) off each week: _____ (the same day each week)
Lunch period: [] 1 hour [] 1/2 hour

[] Four 9-hour days and one 4-hour day ("4-9-4" Option):
9-hour days' hours of work: _____ to _____
4-hour day hours of work: _____ to _____
4-hour day of the week: _____ (the same in each week)
Lunch period: [] 1 hour [] 1/2 hour

[] Eight 9-hour days + one 8-hour day + one Regular Day Off (RDO) ("9-80" Option):
9-hour days' hours of work _____ to _____
Lunch period: [] 1 hour [] 1/2 hour
8-hour day and RDO: _____ Hours of work: 8:00 A.M. to 12:00 P.M. and 1:00 P.M. to 5:00 P.M.
RDO Week Selection: [] Week 1 [] Week 2

If I am a non-exempt employee, I understand that my workweek will end at 12:59 a.m. on my 8-hour day, my lunch period will be from 12 noon to 1 p.m., and my new workweek will begin at 1:00 P.M.; thus, 4 hours of work are and will need to be accomplished before the lunch period and 4 hours of work must be completed after the lunch period.

[] Five 8-hour days with pre-approved flexing of start and stop time on some days ("Flex Schedule" Option):
Standard hours of work Monday through Friday: _____ to _____
Lunch period: [] 1 hour [] 1/2 hour
As a non-exempt employee eligible to earn overtime/CTO, I understand that with prior supervisory approval, I may start earlier or stay later, during the same workweek, to accommodate absences.

[] Five 8-hour days ("5-8" Option):
Hours of work: _____ to _____
Lunch period: [] 1 hour [] 1/2 hour

Note to employee and supervisor: Whenever the beginning of a non-exempt employee's workweek changes (and this happens when an employee is starting or stopping a 9-80 schedule, changing RDOs within a 9-80 schedule, and in some other circumstances), a computation of overtime due to overlapping workweeks must be done. Contact the Payroll Division of the Auditor's Office for help with overlapping workweek overtime computations.



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- I have read the Flexible Work Schedule policy and understand and agree to abide by the terms, conditions and attendance reporting requirements for the work schedule.
I acknowledge that, if I am a non-exempt employee who is eligible for overtime pay, then any work time in excess of 40 hours in the designated work week must be pre-approved.
I understand that I may request a change to my schedule up to two times in a twelve-month period.
I understand that if absent on vacation, CTO, sick leave, or leave without pay on a scheduled workday, the amount of leave deducted shall equal the number of hours scheduled to work that day.
I understand that I may work between the hours of 7:00 A.M. and 6:00 P.M., with either a half hour or hour off for lunch period. Core hours during which I need to be in the office are 9:00 A.M. to 3:30 P.M.
This schedule is not transferable to another work unit or department unless first approved by the new appointing authority.
I understand that this schedule, including hours and days of work, are subject to my supervisor's approval in consultation with the Department Head and may be revoked at any time. The work needs of the Department may necessitate changes to or discontinuing of this schedule.

Employee signature Date
Supervisor signature Date

Approved as requested Approved as modified below Denied

Modification: Describe any modifications or special conditions to the approved schedule:

FLEXIBLE WORK SCHEDULE HOLIDAY WEEK CONSIDERATIONS: OVERVIEW

Note to employee and supervisor: The Holiday Week Overview shown below is a summary of options associated with each schedule type. Please review the Flexible Work Schedule Policy for detail related to holiday week schedule requirements.

Four 10-hour days ("4-10" Option):

- During a workweek with a holiday, employees will work with their supervisor to determine what option is best to adequately cover for the holiday. Options include:
reverting back to an 8-hour-per-day standard Monday through Friday schedule
if the holiday lands on the RDO, move the holiday to the next working day unless that moves the holiday into the next workweek; otherwise the holiday will be moved to the previous working day
If I am a non-exempt employee, and the holiday falls on one of my 10-hour work days and I am not reverting back to a five 8-hour-day schedule, I will be required to use 2 hours of leave balance

Four 9-hour days and one 4-hour day ("4-9-4" Option):

- During a workweek with a holiday, employees will work with their supervisor to determine what option is best to adequately cover for the holiday. Options include:
reverting back to an 8-hour-per-day standard Monday through Friday schedule
if the holiday lands on my scheduled 4-hour day, move the 4-hour day to the next scheduled day, or, if moving forward would push the day into the next workweek, then the 4-hour day will be moved to the previous scheduled day
If I am a non-exempt employee, and the holiday falls on one of my 9-hour work days and I am not reverting back to a five 8-hour-day schedule, I will be required to use 1 hour of leave balance

Eight 9-hour days + one 8-hour day + one Regular Day Off (RDO) ("9-80" Option):

I understand that for 9-80 schedules, due to the FLSA workweek restrictions, non-exempt employees do not have the flexibility and options during a holiday week that other schedule choices may have. During a week with a holiday in which the holiday falls on my regularly scheduled day off, I will receive the next working day off as a holiday, or, if moving forward would push the holiday into the next workweek, then the holiday becomes the workday before the actual holiday. If I am a non-exempt



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employee, and the holiday falls on one of my 9-hour workdays, I will be required to use 1 hour of leave balance. Exempt employees will work with their supervisor to determine what option is best to adequately cover for the holiday.

Telework

I would like to Telework the following days. If I've also requested a Flex schedule option, the telework days would work in conjunction with the flex schedule.

Week One of Pay Period: S M T W Th F Sat Week Two of Pay Period: S M T W Th F Sat

I would like to work a "short-term" telework schedule (referred to as "episodic" in the policy) for this duration:

From To

- The Department Head has affirmatively determined the employee meets the eligibility criteria to participate in a telework program.
The employee has been notified of their allowable telework schedule. Telework days will not be substituted without advance approval of the supervisor/manager.
Full-time telework is extremely rare and may only be permissible episodically, or when necessary and justified, depending on the needs of the job and demonstration of a clear benefit to program objectives and operations.
The employee will perform the following work at the telecommuting site (add pages as necessary):

- Reports on telecommuting work assignments shall be provided to the employee's supervisor in the following manner and frequency:

- County Equipment: in addition to expendable office supplies provided by the County, the following County equipment and/or services shall be provided to the employee for use in telework:

Table with 3 columns: Equipment, Brand Name, Serial Number. Each column has three blank lines for entry.

- Employee agrees to use reasonable care while operating County equipment, to protect the equipment; and to return equipment to the supervisor/manager if employee discontinues telework.
Expenses and reimbursements: The County is not required to pay for any additional equipment to allow someone the ability to work.
Employee agrees to report any occupational injury or illness to their supervisor/manager immediately and complete all necessary and/or County requested documents regarding the injury.
Employee will be available by phone and e-mail during County office hours. Employee will check voicemail and e-mail messages often while teleworking and will return to the worksite in the event teleworking becomes impracticable or if the employee is informed, they need to return to the physical worksite.



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- Employee will comply with the County Personnel Code and all other County policies, including but not limited to the Technology Use Policy. Employee shall have no expectation of privacy when using County systems or technology.
- Employee will adhere to the security and confidentiality policies of the Department and the County, and protect County assets, information and information systems at the remote work location.
- The employee’s standard, designated telework location should not be routinely more than 2 hours from their assigned home base office location. Exceptions to this requirement require CEO approval. Episodic teleworking from distances of greater than two hours away may be permitted by CEO or designee.
- Employee will telework from the following designated workplace: _____ (description such as “home office”.)
- Employee certifies by the following (employee’s signature, below, serves as certification):

Internet connection is sufficient to perform all work duties uninterrupted. Recommendation is 10Mbps consistent speed with less than 150ms latency for a reliable connection. See IGS _____ for more information.	Workplace is away from noise, distractions, and is devoted to your work needs
Workspace accommodates workstation, equipment, and related material	Floors are clear and free from hazards
File drawers are not top-heavy and do not open into walkways	Phone lines and electrical cords are secure under a desk or along wall, and away from heat sources
Temperature, ventilation, and lighting are adequate	All stairs with four or more steps are equipped with handrails
Carpets are well secured to the floor and free of frayed or worn seams	There is a working smoke detector in the workspace area
A home multi-use fire extinguisher, which you know how to use, is readily available	Walkway aisles, and doorways are unobstructed
Workspace is kept free of trash, clutter, and flammable liquids	All radiators and portable heaters are located away from flammable items
You have an evacuation plan, so you know what to do in the event of a fire	Sufficient electrical outlets are accessible
Computer equipment is connected to a surge protector	Electrical system is adequate for office equipment
All electrical plugs, cords, outlets, and panels are in good condition; no exposed/damage wiring	Equipment is placed close to electrical outlets
Extension cords and power strips are not daisy chained and no permanent extension cord is in use	Equipment is turned off when not in use
Chair caster(wheels) are secure, and the rungs and legs of the chair are sturdy	Chair is adjustable
Your back is adequately supported by a backrest	Your feet are on the floor or adequately supported by a footrest
You have enough leg room at your desk	There is sufficient light for reading
The computer screen is free from noticeable glare	The top of the screen is at eye level
There is space to rest the arms while not keying	All necessary equipment to perform required tasks is able to be procured

- *Any waiver of the above requirements must be authorized by the Risk Manager in writing.
- *All new employees are expected to report to their physical location on the first day of work to allow for initial system log-in and access to be established.
- *A home assessment is available to employees upon request.

CERTIFICATION

I understand that telework is an arrangement between me and the County and is not an entitlement or employee benefit. I understand this agreement may be terminated for any reason, at any time, by any party, with or without cause. I certify that I have read the Telework Policy and this Telework Agreement, that I understand their contents, and that I will abide by the terms.

Employee Signature

Date

Supervisor Signature

Date

Note: Applying for FWS and TW? You and your supervisor need to sign on pages 2 and 4. If one or the other, then one set of signatures needed. Supervisor, your signature affirms you have conferred with your DH—you signature serves as the DH’s authorized signer.