

REMOTE WORKSITE AGREEMENT - ANNUAL REVIEW/RENEWAL

The purpose of this document is to review and/or renew an existing and already approved Remote Worksite Agreement.

Employee Information

Employee Name: _____ EMPL ID: _____
Title: _____
Dept. Name: _____ Dept. #: _____
Supervisor: _____
Initial Remote Worksite Agreement Start Date: _____ End Date: _____

Remote Worksite Location

The remote worksite employee agrees to work at the below designated site during the hours specified in the current remote worksite agreement. If the employee wishes to make a change to this location, a Remote Worksite Change of Worksite Location Request must be made and approved prior to the worksite location change.

Location of remote worksite (worksite address):

Address _____
County

City, State ZIP _____
Country

Remote Worksite Review and Renewal

Remote Worksite Review Date: _____ Next Review Date: _____

Describe the business purpose or reason for the renewal of the remote worksite agreement being requested.

Any modifications to the original agreement? Yes No

If yes, provide additional details:

Signature

Your signature below certifies you have completed the remote worksite agreement renewal in accordance with the [UND Remote Worksite Locations Policy](#).

Employee

Date

Supervisor

Date

Reviewed & Approved by:

Human Resources

Date

Send completed form to UND HR: UND.humanresources@UND.edu