## Central Connecticut State University (CCSU) Situational Telework (TW) Pilot Program June 1, 2024 – December 31, 2024 (Academic Secretaries/Administrative Assistants only)

CCSU Administration and AFSCME Clerical Local 196 agree to pilot situational telework for Academic Secretaries for the period June 1, 2024 through December 31, 2024. The request form must be approved by the Department Chair in advance of the TW day. Maximum of one (1) day per week is allowed under this pilot. A set day of the week for the entire period is <u>not</u> permitted under this pilot.

Name:	Job Title/Position:
Department(s):	Requested date to telework:
Summary of work to be performed on TW day:	
Students, faculty, staff, and visitors will be dir for assistance on the TW day.	ected to Name/Room #
<ul><li>Computer/laptop (monitor if applicab</li><li>Reliable telephone and internet acces</li></ul>	te (no expectation of being provided by the University): le) with audio, video, and internet capabilities. s with sufficient speeds to complete work. ms, Outlook, Jabber, and adequate security.
<ul> <li>Employee is required to be available of times, with the exception of breaks are</li> <li>Employee will answer incoming calls to lift an unexpected situation arises required. TW, the Chair will notify the employee.</li> <li>Power outages or disruption of internation complete workday.</li> </ul>	during normally scheduled work hours by MS Teams and Jabber at all and meal breaks. (MS Teams should be set to 'away' during such breaks.) to the department via Jabber during working hours. Siring the employee's physical presence on a day previously approved for e as soon as practicable of the need to report.  et access for any reason require the employee to report to campus to
<ul> <li>Employees may not be dually employ</li> <li>If the employee becomes ill, must care day, the employee must notify the Ch SP, PL, etc.).</li> </ul>	e for an ill family member or experiences an emergency situation on a TW air and shall record the appropriate accrued leave used (e.g. SICK, SFAM, be withheld due to lack of responsiveness, unavailability, or other
I understand my obligations for compliance to	the situational telework pilot program as outlined above.
Employee signature  ^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^	
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Date

cc: maintain copy in department for audit upon request

**Department Chair signature** 

HR/CTW 5/14/2024