

ALTERNATIVE WORK SCHEDULE AGREEMENT
(Attach Approved Alternative Work Schedule Request Form)

Scope and Duration of Agreement

Alternative work schedules are available to employees deemed eligible by the University of Wisconsin-Green-Bay. Alternative Work Schedule Agreements are granted at the discretion of the employer.

This Agreement is established between the University of Wisconsin-Green-Bay, Unit/Department of _____
and _____.

This Agreement shall become effective as of _____ and shall remain in effect until _____ (not to exceed 12 months), or as modified or rescinded by the supervisor and/or division head, employee, or other University administration. In the event that either the University or the employee needs to withdraw from the Agreement, a two-week notice shall be given unless a work place emergency necessitates immediate suspension. Normally, if the University needs to withdraw from the Agreement, it will give the employee two weeks notice. However, the University retains the right to suspend the Agreement at any time.

Every three months or upon the request of the supervisor and/or division head or other university administration, the Agreement will be reviewed by the supervisor and employee. A copy of the Alternative Work Schedule Request should be attached to this Agreement.

This Agreement is subject to the following conditions being met on a continuing basis:

1. The alternative work schedule does not interfere with normal interactions with supervisor, fellow employees, and students.
2. The alternative work schedule does not adversely affect the ability of other employees to perform their work.
3. The employee ensures his/her accessibility to staff who maintain traditional hours and to attend regularly schedule department matters falling outside the alternative work schedule.
4. Personal leave (vacation and sick leave) is handled in the same manner as prior to the implementation of an alternative work schedule.
5. The employee agrees to and follows an established work schedule.

Other conditions of agreement:

I agree to the proposed adjustment in work schedule over the duration of the agreement period. It is understood that the modified scheduled hours and days of the week of this position are subject to the changing academic and business needs of the University. The University reserves the right to adjust schedules accordingly and will make every effort to provide adequate notice.

Employee Signature

Date

