

## Washington Military Department

# Telework Participant Agreement

Telework Form # 2024-15 (Revised December 8, 2023)

The following constitutes a telework agreement between the Employee named below and Washington State Military Department (WMD). This agreement can be canceled at any time at the discretion of Management.

Employee Name				Employee ID	
Position #	Official Duty Station	Division/Program	Work Schedule (Days and Hours	)	
Primary Telework City			State (If outside of Washington)		
Telework Frequency					
Please check the box below that most closely matches the telework frequency based on average hours per week					
Less than one day per week - Adhoc (Less than 20%) - (EP0)					
One day per week for 5/8 schedule or 20-39% if working 4/10 or other schedule (EP5)					
Two days per week for 5/8 schedule or 40-50% if working 4/10 or other schedule (EP6)					
Three days per week for 5/8 schedule or 51-75% if working 4/10 or other schedule (EP7)					
Four days per week for 5/8 schedule or 76-90% if working 4/10 or other schedule (EP8)					
Full time/ near full time - If working 91-100% of working hours (EP9)					
The supervisor and employee have documented expectations for office work. The employee is expected to be available via telephone, e-mail, and MS Teams or other systems used to communicate virtually and will inform their supervisor of the need to be absent or of any changes in their schedule.					
By checking the boxes below, the employee verifies they have read, understood, and will comply with the following WMD policies and/or agreements:					
HR-225-02 Telework Policy					
HR-207-03 Ethics IT-306-05 Use of State Provided IT Hardware and Software					
Additional agreements (as applicable, such as planned end date; for out-of-state telework, expectations for on-site presence and notice provisions)					

#### Term of Agreement

This Agreement shall become effective on the date signed below and shall remain in effect until canceled by either party. The employee and their supervisor will review this Agreement during the employees regularly scheduled performance evaluation. Any changes to this agreement must be in writing and signed by both parties prior to implementation.

#### Secure/Confidential Materials

The employee must receive prior employer approval to (1) remove secure/confidential materials from the official workstation, or (2) access secure/confidential information through computers. The employee will take reasonable precautions to secure confidential materials at all times such materials are in the employee's possession or control. The employee agrees to abide by all data security procedures, as described in WMD Telework and IT Policies.

### **Ergonomics and Safety**

The employee will ensure their designated telework space is maintained in a safe, healthful, professional and secure manner. To do a self-assessment of your workstation, go to: Work from home ergonomics self-assessment (wa.gov). This link contains information on adjusting your chair, armrests, keyboard height, monitor height, etc. along with information on controlling repetitive hand and wrist tasks. If you still have any concerns regarding the safety of your workstation, contact the Safety Officer at 253-512-7217.

#### **Liability for Injuries**

If approved for telework, the employee understands that the employee remains liable for injuries to third persons and / or members of employee's family on employee's premises. Employee agrees to defend, indemnify, and hold harmless employer, its affiliates, employees, contractors and agents, from and against any and all claims, demands or injury to persons (including death) or damage to property caused, directly or indirectly, by the services provided herein by employee or by employee's willful misconduct, negligent acts or omissions in the performance of the employee's duties and obligation under this Agreement, except where such claims, demands, or liability arise solely from the gross negligence or willful misconduct of the employer.

## **Inventory of Equipment Issued to Employee**

Item	Serial Number or description
Lap Top Computer (Asset tag on bottom) or Desktop	
Monitor(s) (Serial #, Service tag) – Normally on back of comput where you plug in, if one has been issued – not found on all monitor	
Docking Station Cords There are no asset/service # Keyboard Mouse	Other Items (Chair, Sit-stand, headphones, etc.)

Note: Departmental policy requires Department-owned resources including equipment, supplies, e-mail, internet access, furniture, etc., be used for work related activities only. Department is not responsible for personally owned equipment, etc.

Approval Signatures					
Employee remains obligated to comply with all of WMD's rules, practices, instructions, and this agreement. Employeeunderstands that violation of this agreement may result in preclusionfrom telework as well as disciplinary action up to and including dismissal.					
Digital Signatures are acceptable when routed through the authorized signer's email. Please do not lock signature when you sign as there are portions of the form that must be completed once the form is submitted to the HR/Payroll Office.					
Employee's Signature	Date				
Supervisor's Signature	Date				
Division Director's Signature	Date				
The effective date of this agreement is the date of the last required signature unless otherwise specified here:					
Cancellation/Denial Signatures					
Telework Denied					
Telework canceled per Employee					
Telework canceled per Supervisor					
Employee's Signature					
Supervisor' Name	Supervisor's Signature				
Division Director's Name	Division Director's Signature				
Describe reason for cancellation/denial and attach supporting documentation (if applicable):					

Route completed form to telework@mil.wa.gov.

For HR Only: If approved for out-of-state, forward copy to Payroll.