

DCS AWS Acknowledgement Form

All terms set forth in the State's Alternative Workplace Solutions Policy ["AWS Policy"], [14-001, Alternative Workplace Solutions \(AWS\)](#), Department of Human Resources Policy 14-001 are hereby incorporated by reference in this DCS AWS Acknowledgement Form.

This acknowledgement form serves as the guiding program document regardless of which AWS position category is utilized by the DCS employee.

DCS Employee Name:

DCS Employee Edison ID #

DCS Employee's Official Office Location:

The following terms have been agreed upon
concerning your assigned AWS position category

Section I – Employee Responsibilities in all Position Categories

1. Employee agrees to adhere to DOHR AWS policy, DCS guidelines, and the terms of this acknowledgement form, with policy taking preference should a conflict exist between the Policy and the Agency Guidelines. The Agency concurs with employee participation and agrees to adhere to policy, guidelines, and Acknowledgement form, with policy taking preference.
2. The Employee acknowledges that he/she will comply with all Enterprise Information Security Policies, found at the following web address: <https://teamtn.gov/sts/topic/sts-security-services-resources-security-policy-documentation>.
3. Employee acknowledges that he/she will attend any in-office meetings as requested by his/her supervisor as soon as practicable and also participate in Work from Home surveys and/or requests for information.
4. Employee acknowledges that he/she will plan for and accomplish necessary photocopying, mail, and facsimile transmissions at the agency provided work site. In emergency situations, and with the prior approval of the supervisor, costs associated with the copying of work-related materials, facsimile charges, express mail, etc., may be reimbursed.
5. Employee acknowledges that he/she will communicate on a regular basis with the supervisor, in the supervisor's preferred method of communication, as often as the supervisor requires.
6. Employee acknowledges that he/she will complete all assigned work in accordance with the supervisor's instructions.
7. Employee acknowledges that he/she will use approved safeguards to protect state records from unauthorized disclosure, damage, or release of confidential business information and to comply with all requirements set forth by the agency and State laws, rules and regulations, and policies.

Confidential business information may not be removed from state offices except as permitted and authorized by established state and agency procedure.

8. Employee acknowledges that he/she will perform his/her officially assigned duties at the officially designated office location, their residence, or approved alternative location, or while on official travel. Failure to comply with the terms of this acknowledgement form may result in administrative action, such as charge of leave, suspension, termination from State service, or other disciplinary action, as warranted, determined on a case-by-case basis.
9. Employee acknowledges that he/she will not conduct unauthorized personal business [including, but not limited to, dependent care, home repairs, and real estate transactions] while in official duty status at the Work from Home/Mobile Work site. The employee agrees to arrange for any dependent care and other personal responsibilities so as to ensure that the employee can work without interruption.
10. Employee acknowledges that he/she will complete the required training as required by policy.
11. Employee acknowledges that he/she will report to his/her officially designated office location without delay at the request of the supervisor, or as soon as is practicable.
12. Employee acknowledges that disciplinary actions or performance issues may result in their supervisor taking action to improve performance (i.e., making temporary adjustments to the agreed upon schedule or AWS position category assignment).

Section II – Mobile Position Category *(applicable to only mobile employees, for example case managers)*

1. The official office for mobile employees is the county office they report to. For mileage reimbursement, mobile employees calculates:
 - a) The distance from their home to their destination; and
 - b) The distance from their assigned county office to their destination.

The mobile employee uses the lesser of the two mileage distances to determine their official starting point to use for mileage reimbursement. This remains consistent with DCS policies regarding mileage reimbursement.

2. To ensure the needs of the agency, the employee, and the public are best served by the AWS arrangement, the supervisor sets forth any additional necessary terms of the arrangement in the space provided below. See DOHR policy 14-001 Appendix A for guidance on Mobile Work.

Section III – Work from Home Position Category

(applicable to only work from home employees, for example internal affairs employees)

1. AWS work from home address: _____

2. Employee's agreed upon work from home schedule:

Monday	Tuesday	Wednesday	Thursday	Friday

3. The employee's supervisor and agency Human Resources division will maintain a copy of the employee's AWS schedule. Employee's time and attendance will be recorded as Work from Home time using a special Edison time reporting code [TRC] established for this purpose. The employee's supervisor will certify the time and attendance for hours worked as is standard policy.
4. Employee acknowledges that he/she will maintain safe working conditions at their home or approved alternative worksite. Employee acknowledges that he/she will immediately report to the supervisor and/or the agency Human Resources Officer (HRO) any accident or injury occurring at the Work from Home site or approved location. An employee's injury may be covered under the State Division of Claims if a determination is made that the employee was injured in the course of performing official duties at the Agency owned workstation or the Work from Home location, in accordance with applicable regulations and standards governing Division of Claims liability.
5. Employee acknowledges that he/she will notify his/her supervisor or manager immediately or as soon as practicable when he/she has a new address or change to the approved alternative worksite location.
6. The official office for work from home employees is the county office they report to. For mileage reimbursement, work from home employees calculate:
- a) The distance from their home to their destination; and
 - b) The distance from their assigned county office to their destination.

The work from home employee uses the lesser of the two mileage distances to determine their official starting point to use for mileage reimbursement. This remains consistent with DCS policies regarding mileage reimbursement.

Section IV – Utilizing Shared (unassigned) Space

If the employee is utilizing a Shared (unassigned) space, the Supervisor sets forth the necessary terms of the arrangement in the space provided below. See DOHR policy 14-001 Appendix B for guidance on Free Address concepts.

I have read and understand all the provisions of this AWS acknowledgement form and agree to abide by them.

Employee Name:

Employee Signature:

Date:

The Agency agrees to adhere to the provisions of this agreement. Approved by:

Supervisor Name: _____ Supervisor Signature:

Date:

Appointing Authority (or designee):

Date: