## **Remote Work Agreement Form**

Additional Comments or Terms

## **Employee Details Employee Name** Employee ID Department Manager/Supervisor **Remote Work Details** Remote Work Start Date Remote Work End Date Remote Work Location **Expected Work Hours** Days of the Week (Remote) **Agreement Terms** Work Responsibilities Communication Methods & Frequency Equipment Provided (if any)

Acknowledgement		
Employee Signature		
Date		
Manager/Supervisor Signature		
Wanagen Supervisor Signature		
Date		