



## **Request for Modified Work Arrangements**

*Please note: You may add pages to your submission if you find the space provided for information is not sufficient; in the additional pages we ask that you indicate the number of the question that you are answering.*

*Also, please remember that:*

1. Only exempt employees may participate in the hybrid pilot program;
2. Approved pilot programs should plan to have 85 – 95 percent of staff present on any given day;
3. The plan should specify how the hybrid schedule will achieve its intended goals or objectives and, in turn, what measures you will use to measure its progress toward each of those goals.

**1. Name of Department or Area (D/A)**

---

**2. Name and Title of Individual Submitting Form**

---

**3. Name and Title of D/A Leader (if different from #2)**

---

**4. Number of Staff in D/A**

---

**5. Number of Temporary or Contract Workers in D/A**

---

**6. Number of Faculty in Department (if applicable)**

---

**7. Does the D/A directly serve students (e.g., instruction, extracurricular activities, guidance, support, etc.) Y \_\_\_ N\_\_\_**

*If Yes, briefly describe those services and the nature in which they were provided prior to the pandemic and during remote operations.*

**8. Does the D/A directly serve employees (e.g., human resources and facilities functions, etc.) Y\_\_\_ N\_\_\_**

*If Yes, briefly describe those services and the nature in which they were provided prior to the pandemic and during remote operations.*

**9. Does the D/A directly serve the public? Y\_\_\_ N\_\_\_**

*If Yes, briefly describe those services and the nature in which they were provided prior to the pandemic and during remote operations.*

**10. Please explain the reason(s) for your request for modified work arrangements.**

**11. Please provide the details of your plan. Be as specific as possible regarding positions affected and overall impact on the unit's on-campus presence.**

**12. Please explain how this plan will maintain or enhance the D/A's contributions to the university's mission.**

**13. Please explain how you will measure the effects of the modified work arrangement on the department or area's contributions to the university's mission.**

**14. Please provide any other information you would like the university to consider when evaluating this request.**