



Presentation/Proposal Form

Name: _____

Date: _____

Department: _____

Contact Information: _____

- ❖ Complete Items 1–8 to the best of your ability (see Instructions form for reference).
- ❖ If an item listed is not relevant to your specific presentation to College Affairs, please mark it *N/A*.
- ❖ E-mail the completed checklist to the College Affairs committee support specialist by the specified deadline.

1. PRESENTATION/PROPOSAL ABSTRACT (150–250 words)

2. TYPE OF PRESENTATION/PROPOSAL

- Information Item (requires approval of CA Chair)
- Action Item
 - Information and committee feedback
 - Procedure—*revision* (Attach current procedure with proposed changes highlighted using track changes.)
 - Procedure—*new* (Attach proposed procedure separately.)
 - Identify suggested location in *General Procedures Manual*: _____

- Policy—*revision* (Attach current policy with proposed changes illustrated with track changes)
- Policy—*new* (Attach proposed policy separately.)
 - Identify suggested location in *General Policy Manual*: _____
- Other: _____

3. BUDGET IMPACT

4. INSTRUCTIONAL REQUIREMENTS/IMPACTS

5. OPERATIONAL IMPACT

6. STUDENT IMPACT

7. ANTICIPATED IMPLEMENTATION TIMELINE

8. MOTION TO BE RECOMMENDED



CENTRAL OREGON
community college

Work From Home Policy and Procedures

Central Oregon Community College (COCC) recognizes there may, on occasion, be circumstances when it would be beneficial for staff to work at remote locations, either on a permanent basis, or to complete a particular task. However, it is not possible to offer a Work From Home (WFH) option to all staff as the requirements for some jobs will not be suitable for such arrangements. The operational needs of COCC take precedence over WFH.

Eligibility

Prior supervisor permission is required before an employee can engage in a WFH agreement. The employee shall submit a WFH Agreement to their supervisor for review. Consideration will be given to any such requests. A decision regarding the suitability of working at home will take into account all relevant circumstances. The decision of the supervisor is final.

All arrangements for monitoring, supervision, workload, etc., will be agreed upon in accordance with normal COCC management procedures. For a single occurrence of remote work, the precise project or task must be agreed upon beforehand.

Availability/Responsiveness

The employee must be available and respond to phone calls, emails or chats during their proposed days and times of work.

In the event that the employee is sick during a period of working at home, COCC's usual sick leave reporting rules apply and must be followed.

WFH is not an alternative to paid dependent care.

Technology Equipment and Support

Employees engaging in a WFH agreement, will be provided a standard COCC computer purchased by the employee's home department. The employee and supervisor can agree on a laptop or desktop/monitor set up and then coordinate with the COCC ITS Department regarding payment and purchase. Employees are not to use their home computer to complete COCC-related work activities. Employees are responsible to maintain and pay for their own intranet access to their home work environment.

The following stipulations apply:

- The computer will be installed at the employee's home by the employee.
- The computer must be brought to COCC annually for a software and security refresh.
- The computer is not part of COCC's lifecycle replacement program and will be replaced and paid for every 5 years by the WFH employee's department.
- Only approved and licensed software can be installed on the computer.
- The ITS department will not visit the home environment to provide support; the employee may call the ITS helpdesk at 541-383-7400 or submit a [helpdesk ticket](#) for any assistance.
- Employees should use the terminal server environment to complete their work and not maintain any college data on the physical PC.

Quarterly Reviews

Every quarter following the initiation of the WFH program, the employee and supervisor will review the WFH agreement. Adjustments can and should be made by the supervisor to ensure the department and college operational needs are being met, and the employee is performing to expected standards.

Termination

This agreement may be terminated in writing by either the employee or the College. Ten (10) working days' notice is required. The College reserves the right to terminate the agreement without notice if the employee violates any policy.

If employment is terminated, the employee will promptly return all COCC equipment, software, documents, supplies and property in the employee's possession.

Physical Environment

Employees are required to comply with COCC's Health and Safety policy while they are at work. Employees are expected to take reasonable care of their own health and safety and that of any third party with whom they come into contact during the course of their employment.

The worksite must be in the state of Oregon.

COCC assumes no liability for injury at the remote work site to any other person who would not be in the work area if the duties were being performed at the regular place of employment. If the employee is injured, the employee must notify their supervisor immediately and complete all requested documents regarding the injury.

Security

Employees are advised not to release their home address and telephone number to non-staff members. Employees are also strongly advised against meeting volunteers, students, or customers at home. In the event that any employee feels these types of interactions are essential, prior supervisor approval is required.

Confidentiality

Equipment, documents, and data should be accessible only to the employee and safeguarded from access by other members of the household and visitors.

Travel Costs and Other Expenses

Claims may be made for COCC required travel to meetings from and to the 'normal place of work', i.e. the employee's home, in accordance with COCC travel policy. This does not include travel to the employee's regular assigned place of employment.

Employees based at home are expected to provide at their own expense furniture, heating, lighting, internet access, phone, etc.

Employees are advised that working from home may affect the provisions of any home contents insurance and are advised to inform their insurers prior to commencing the WFH agreement.

Compliance

Failure to comply with any aspect of this policy or related policies such as Health & Safety, Employment, and IT policies may be grounds for disciplinary action.



Work From Home (WFH) Agreement

Employee Name: _____	Supervisor Name: _____
Employee Job Title: _____	Proposed Days/Times: _____
Employee Department: _____	Proposed Start Date: _____
Employee Primary Contact #: _____	Length of Agreement (Months): _____

Employee’s Certification:

I understand and agree to the following:

- A. The Work From Home Agreement is a management option, not an employee right or benefit.
- B. All existing terms and conditions of employment, including but not limited to, position description, salary, benefits, vacation, leave and overtime remain the same as if the employee worked at a regularly assigned place of employment.
- C. This agreement may be terminated in writing by either the employee or the College. Ten (10) working days' notice is required. The College reserves the option to terminate the agreement without notice if the employee violates any policy.
 - I have read, understand and agree to the College’s Working From Home Policy.
 - I have read, understand and agree to the College’s Acceptable Use ITS Resources Policy.
 - I agree to review this WFH agreement quarterly with my supervisor.

Employee’s Signature: _____ Date: _____

Supervisor’s Certification - I certify that:

- A. The employee and the work assignments satisfy all the requirements of the Work From Home Policy.

Note below the days and hours per week the Employee is approved to work from home:

Supervisor’s signature: _____ Date: _____

Approvals:

PAT Member: _____ Date: _____

Human Resources: _____ Date: _____