



HARTNELL COLLEGE

Classified Employee Request for Hybrid Work

Name:	
Job Title:	
Department:	
Supervisor:	
Date of Request:	

- In accordance with Article 27, I am requesting hybrid schedule to work remotely for **no more** than 40% of my assigned work week. (i.e. 40 hour work week, 16 hours telework)

Please use the table below to specify your hybrid schedule:

Hybrid Work Schedule							
Day of Week	Workday		Meal Period		Location(s)	Total Daily Hybrid Hours	Additional Information
	Start Time	End Time	Start Time	End Time			
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							

Effective Start Date: _____

Effective End Date: _____

Employee Signature

Supervisor Signature

<input type="checkbox"/> Approved by Supervisor <input type="checkbox"/> Denied by Supervisor
--

Reason for denial: _____ _____

If requested schedule is not approved, please forward form to the Vice President of Human Resources and CSEA President for further review.



HARTNELL COLLEGE

Classified Employee Request for Hybrid Work

- In accordance with Article 27, I am requesting full remote work schedule to work remotely for **more** than 40% of my assigned work week. (i.e. 40 hour work week, 30 hours telework)

Remote Work Schedule							
Day of Week	Workday		Meal Period		Location(s)	Total Daily Hybrid Hours	Additional Information
	Start Time	End Time	Start Time	End Time			
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							

Information regarding request for full remote work schedule:

Effective Start Date: _____

Effective End Date: _____

Employee Signature

Supervisor Signature

Approved by Supervisor
 Denied by Supervisor

Vice President of Human Resources Signature

Approved by VP of HR
 Denied by VP HR

If denied, reason for denial:

If denied, reason for denial:
