

EMCBC Extension of Medical Telework Agreement

Privacy Act Statement - Section 6120 of Title 5 to the United States Code authorizes collection of this information.

The information you submit in this application/agreement is protected by the Privacy Act of 1974. Providing information and signing this agreement is voluntary, but failure to sign this agreement will result in you not being approved for the employment arrangement specified herein. The primary use of the information contained in this agreement is by applicable management officials and supporting staff to approve and record the entitlements of this employment situation.

Section I, Application - to be completed by employee	
Employee's Name:	Position Title & Series:
Organization:	
Supervisor's Name:	Supervisor's Telephone #:
Alternative Worksite Address:	Alternative Worksite Telephone #:
Duration: _____ through _____ ; Extended through _____	
*Medical documentation is required and should be submitted with a separate Medical Telework application.	
1. Describe any changes in the specific work to be performed at the alternative designated work site.	
Employee's signature & date: _____	
Section II, Approvals	
Approved Disapproved- reason: _____	
Supervisor's Signature & Date: _____	
Employee is eligible Employee is not Eligible – Reason: _____	
Telework Program Manager's Signature & Date: _____	
Approved Disapproved- reason: _____	
EMCBC Director's Signature & Date: _____	

Distribution:

- Original – EMCBC Office of the Director
- Copy – Supervisor/Employee/Timekeeper