Faculty Flexible Work Arrangement Form

To request a Flexible Work Arrangement (FWA):

- Page 1 to be completed by employee. Page 2 to be completed by direct supervisor to finalize the FWA request. All completed forms (APPROVED OR DENIED) must be submitted to the department's Human Resources representative. This form should be used for faculty, adjuncts, and salaried graduate students.
- Forms do not need to be submitted to Campus HR unless requested by HR to do so.

Faculty with 100% remote assignments only require a FWA form if they will be teaching from outside of the DFW region			
Employee Name	Employee ID#	Job Title	
Employee Status	Supervisor Name		
Department ID#	Department		
Is remote work location outside of a 50	mi radius of DFW? Yes	No	
Location of remote work: City:		State:	
Comments related to request to work outside of a 50 mile DFW radius (as needed):			
Flexible Arrangement Type	Effe	ective Start Date(s) Proposed:	
Compressed Week			
Flexible Schedule			
Remote Working	Effe	ctive End Date(s) Proposed:	
☐ Ending FWA			
escribe the arrangement/termination you are reque			
pacted by the work arrangement requested (course	es being taught, office hours, serv	ice on committees, research, advising, etc.)	

NOTE: This agreement does not change the basic terms and conditions of your employment at UNT. You will perform all of your duties as set forth in your job description, as well as those additional and/or different duties that the department may assign from time to time. Further, you remain obligated to comply with all University (as well as the department's) policies and procedures.

Date of Submission to supervisor:

Telecommuting work arrangements may be adjusted or terminated by your manager at any time based on the compatibility of your job responsibilities with remote working and/or the departmental operational needs, or if your manager deems that the arrangement is not working effectively or as envisioned.

Please note, due to federal tax and labor laws working outside of the United States may not be possible. Requests to work from an international work location require additional approval from the division Vice President.

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The next section of this form is to be completed by your direct supervisor.		
The proposal is:		
approved		
approved, with supervisor amendments		
not approved		
Final description of the arrangement as amended by the supervisor	or and agreed upon with the employee:	
Amended Start Date(s):	Amended End Date(s):	
If the employee's proposal is NOT approved, provide the reason h	ere:	
Employee Signature	Date	
Supervisor Signature	Date	
Supervisor signature	Bute	
Dean Signature	Date	
Executive Dean Signature	Date	
Vice President Signature (required for any request for interna	ational work location) Date	
The Freshell Signature frequired for any request for international work location.		

Please email completed form to Academic.Resources@unt.edu