

Delaware Technical Community College Flexible Work Arrangement Request Form

Please note, certain positions may not be eligible for flexible work arrangements due to program needs or the job duties of the position.

Employee Name: _____ Position: _____

Work Location: _____ Department/Division: _____

Employee requests approval for the following flexible work arrangement:

- Flextime – temporary adjustment of schedule to allow employees to make up time that is approved by the supervisor
- Alternative Work Schedule – non-standard (other than 8:30 – 4:30) start and end times
- Compressed work week – enables employees to work fewer than five days a week; usually allows for extra day off every week or every other week.

FIRST WEEK	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start Time:						
End Time:						
Hours Worked:						
SECOND WEEK	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start Time:						
End Time:						
Hours Worked:						

Start-to-end time to include standard unpaid 30-minute meal break.

Reason(s) for Request: Please indicate all information you wish to be considered, including the impact the requested change will have on department operations, Student Success, and/or work/life balance.

Employee Signature

Date

APPROVAL SECTION
To be Completed by Supervisor

All requests should be focused on organizational needs, student success, work/life balance, and objective criteria related to work performance and job demands. A consistent approach to analyzing each request should be applied. It is important to communicate to each requestor the decision and its rationale.

Please explain the impact on operations:

Please explain the impact on Student Success:

Please explain the impact on employee satisfaction/productivity:

Please identify any special considerations/issues (i.e., building access, etc.):

Comments:

APPROVED

DENIED

Supervisor Signature and Date

Date

DEAN/DIRECTOR/ADMINISTRATOR

Comments:

APPROVED

DENIED

Dean/Director/Administrator Signature

Date

Distribution: *Original* to: Location Human Resources for employee file
Copies to: Assistant Vice President for Human Resources
Dean/Director/Administrator
Employee
Supervisor