BUMED Remote Work Agreement

Attention: All individuals handling this information are required to protect it from unauthorized disclosure. Handling, storage, reproduction, and disposition of the attached document(s) must be in accordance with 32 CFR Part 2002 and applicable agency policy. Access to and dissemination of Controlled Unclassified Information shall be allowed as necessary and permissible to any individual(s), organization(s), or grouping(s) of users, provided such access or dissemination is consistent with or in furtherance of a Lawful Government Purpose and in a manner consistent with applicable law, regulations, and Government-wide policies. The electronic acceptance or signature of this agreement certifies that personnel will abide by the agreement, BUMED's remote work policy and requirements, and supplemental guidance provided by the supervisor.

Employee Information

Personnel Name:

Job Title, Pay Plan, Series, Grade or Rank:

Work Schedule and Hours of Work:

Remote Position Information

Regular Worksite Name and Address:

Official (Alternative) Worksite Address:

This position was recruited as a remote position.

requested as a remote position.

requested by supervisor

requested by employee

This agreement is for

Local Remote Position

Distant Remote Position

Sources of Support:

(Sources for obtaining supplies, location of the common access card facility, or other relevant resources and locations that support completion of assigned duties.)

Provided Work Equipment and Supplies:

Assignments and Communication

(This may include work assignment, clarification related to remote worksite, agreements related to office communication, checking/responding to contact, and supervisor communication)

Navy Specific Remote Work Training

(Identify any specific requirements and completion date, if applicable).

Travel Costs and Relocation Expenses

All costs associated with a move to the new official worksite are the responsibility of the employee. The employee agrees to waive any rights to moving expenses if directed to return to the regular worksite based on a decline in performance or misconduct.

Employee Initials:

Remote Work within the locality pay area:

- Employees will not be paid for local travel to the agency's worksite if their official worksite is within the local commuting area (50-mile radius, as defined in the Joint Travel Regulations (JTR)).
- Employees will be paid for travel to the agency's worksite if their official worksite is outside the local commuting area (50- mile radius, as defined in the JTR).
- Employees will be paid for travel from their official worksite for official business travel to locations away from the agency's worksite.

Remote Work outside the locality pay area:

- Employees will be paid for travel from their official worksite for official business travel to the agency's worksite.
- Employees will be paid for travel from their official worksite for official business travel to locations away from the agency's worksite.

Pay Entitlements

All pay entitlements (including locality-based pay) and other government benefits are based on the new official remote worksite identified above.

Requests to Change or Termination of Approved Alternative (Remote Work) Location

Employees must obtain supervisor's oral or written approval to work at a location other than the approved alternative remote worksite prior to making any arrangements and reporting to work (e.g., temporary arrangements).

Requests for permanent changes to alternative remote work location must be made at least 30 calendar days in advance and cannot be effected until approved. Approved requests will require a new remote work agreement and the servicing human resources office will complete a Standard Form 50, "Notification of Personnel Action," documenting the approved alternative worksite location.

Remote work may be terminated due to failure to meet performance standards, misconduct resulting in disciplinary action, or the needs of the organization.

Signatures and Approvals

Employee Signature: I acknowledge that I have read, understand, and will comply with all the provisions outlined in this agreement and the related guidance.

Supervisor Recommendation:

Recommend Do Not Recommend or Recommend Termination (Provide Explanation below)

Supervisor Signature and Date

Approving Official Decision: Second level supervisor or higher shall serve as the Approving Official.

Approve Disapprove or Terminate (Provide Explanation below)

Approving Official Signature and Date