## Dependent-Flextime Agreement Template

## Introduction: How to Use This Tool

The Dependent-Flextime Agreement Template is used to agree on expectations connected to individual temporary work arrangements implemented during a pandemic when there is a necessity for the employee to simultaneously care for dependents. It is to provide a structure for an employee agreement to work hours, working from home norms, and any other changes to office hours during a pandemic. It focuses on including caregiver expectations and accommodations.

This agreement offers an email introduction to the attached template:

Dear [recipient’s name],

We want to make sure that our employees are successfully adjusting to working from home during the pandemic. This letter summarizes agreed upon working norms and regulations, and is informed by the pandemic care policy, pandemic policy, and flextime policy.

### Purpose

We want to outline working arrangements for employees who identify as caregivers and are working from home during the pandemic.

Although flextime is often a privilege, in this case, it is [strongly suggested / optional / required]. To prepare employees, we want to provide guidelines between an individual and manager. It is important to note that despite being out of the office, employees working from home during a pandemic should not negatively impact:

* The employee’s performance or that of another employee.
* Customer service or internal service-level agreements.
* Inter-departmental collaboration and communication.

Having said that, we acknowledge that employees with caregiver status (or other employees that identify as needing special accommodations) may need individualized planning and managing for them to succeed. As such, we want employees to formalize their working from home plans to meet their needs.

### Eligibility

At this time, [most/all employees, please specify] will be working from home. Due to the time-sensitive nature of their associated tasks, and to ensure appropriate service levels, the following job positions are not eligible for flextime:

* [List job title]
* [List job title]
* [List job title]

### Duration

This agreement is subject to change, based on the unknown length of impact of the pandemic. Should you want to change the agreement you must book time to speak with your manager to discuss. The agreement varies based on the amount of time it applies for (see compensation section).

### Schedule

Outlined below are the terms and conditions for flextime, as agreed upon by the participating employee named above and their supervisor. A copy of this agreement shall be kept on file with the flextime employee’s manager and the original will be filed with the Human Resources Department.

Below is the agreed upon work schedule for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (employee name), for the time period from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. This agreed upon timeline is subject to change. Shall the employee want to change their agreement, they must contact their manager to discuss and get their approval.

Choose the appropriate table or form from the five options outlined below. Delete those tables you do not need.

### Fixed Schedule Agreement

|  |  |  |
| --- | --- | --- |
| **Day** | **Begin Time** | **End Time** |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| **Total hours worked:** | | |

Special schedule requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Daily Flex Schedule Agreement

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (employee name) will work \_\_\_\_\_ (number of hours) per week, adhering to core hours of between [insert hour range] am and between [insert hour range] pm [Monday to Friday, insert custom weekdays if needed].

Further, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (employee name) will adhere to [company name]’s bandwidth requirements of between [define range] on weekdays, and between [define range] on weekends.

Special schedule requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Compressed Workweek Agreement

|  |  |  |
| --- | --- | --- |
| **Day** | **Begin Time** | **End Time** |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| **Total hours worked:** | | |

Special schedule requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### 5x4 Workweek Agreement

|  |  |  |
| --- | --- | --- |
| **Day** | **Begin Time** | **End Time** |
| Week 1 Monday |  |  |
| Week 1 Tuesday |  |  |
| Week 1 Wednesday |  |  |
| Week 1 Thursday |  |  |
| Week 1 Friday |  |  |
| **Total hours worked week 1:** | | |
| Week 2 Monday |  |  |
| Week 2 Tuesday |  |  |
| Week 2 Wednesday |  |  |
| Week 2 Thursday |  |  |
| Week 2 Friday |  |  |
| **Total hours worked week 2:** | | |

Special schedule requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Extreme Flextime

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (employee name) will complete the following assigned outputs by the due dates outlined below but will not be responsible for maintaining a work schedule that corresponds to [company name]’s business hours. Continuance of this flextime agreement is contingent upon the timely completion of these deliverables and upon on the quality of work being submitted.

|  |  |
| --- | --- |
| **Deliverable** | **Due Date** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

### Compensation

Should the dependent care disruption be anticipated to last between 5-10 working days, and the employee expects they can work a minimum of 50% of their regularly scheduled hours, then the employee will receive full pay. In the event the employee expects that longer-term (11+ working days) measures may necessary to continue working while caring for dependents, they may voluntarily request a reduction in hours for a temporary period. The options available to the employee will result in an alignment of pay to the percentage of time worked, as follows:

|  |  |  |
| --- | --- | --- |
|  | **Longer-Term Hours Reduction** | ***Examples*** |
| Minor Drop in Hours | 0.8 – 1.0 (80-100% working hours) = 100% pay  0.6 (60% working hours) = 60% of pay | *NOTES:*   * *FTE = Full-Time Equivalent*   Example: Five-day work week  (40 hours/week)   * + 5 days = 40 hours = 1.0 FTE   + 4 days = 32 hours = 0.8   + 3 days = 24 hours = 0.6 * 2 days = 16 hours = 0.4 * 1 day = 8 hours = 0.2 |
| Majority Drop in Hours | 0.4 (40% working hours) = 40% of pay  0.2 (20% working hours) = 20% of pay |

Indicate number of days employee will be working flex hours \_\_\_\_\_

Indicate weekly hours worked \_\_\_\_

Indicate percentage of working hours \_\_\_\_\_

Based on the number of days [5-10, 11+], percentage of working hours of [insert percentage], the employee will be compensated with [insert percentage].

### Performance Levels and Changes in Expectations

Should managers identify a change in performance level, they may meet with the employee to make changes to the agreement. The employee and manager may need to decrease the level of hours worked, given the caregiver responsibilities. Before this action is carried out, managers must make accommodations necessary for employees that have caregiver status.

Performance level assessment may change based on the nature of flex work and the changing priorities of the business due to a pandemic. Your manager is responsible for keeping you up to speed throughout.

### Communication

Employees will be required to be reachable within their working hours (and additional, if needed). Should they be unavailable during agreed upon times, they can communicate with their manager regarding how long they will be away. The manager will set communication norms about when and how often the employee should be communicating with them and the team.

### Signature Section

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (supervisor’s name), have reviewed the above information with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (employee’s name).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Signature Date

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (employee’s name), have read and understand the Dependent-Flextime Agreement, and agree to abide by its rules. I also understand that this agreement is not an employment contract or an employment benefit and that the agreement may be changed or amended as needed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s Signature Date

### Revision History

|  |  |  |  |
| --- | --- | --- | --- |
| **Version** | **Change** | **Author** | **Date of Change** |
|  |  |  |  |
|  |  |  |  |
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