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Work Schedule Agreement

**Updated: Jan 5**

**[Company Name]**

**Effective Date:** [Insert Date]

**Employee Name:** [Insert Employee Name]

**Position Title:** [Insert Position Title]

www.yourwebsite.com

**Add Your Company Logo/Name here**

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# Work Schedule Agreement

## How to Use This Document

This Work Schedule Agreement is designed for employers and employees to define and formalize expectations around flexible or hybrid work arrangements. It can be customized to fit specific roles, schedules, and organizational needs. To use this template:

1. **Fill out employee-specific details** where indicated.
2. **Adjust clauses** to reflect the specific requirements of your organization and the agreed-upon arrangement.
3. **Review thoroughly** with the employee to ensure mutual understanding.
4. **Sign and date** the agreement, ensuring all parties retain a copy.

# Agreement Overview

This agreement outlines the terms and conditions under which [Employee Name] will perform their duties under a flexible or hybrid work arrangement. It is intended to balance employee needs with the operational requirements of [Company Name].

## 1. Work Arrangement

1. Work Schedule

* **Start Date of Arrangement:** [Insert Date]
* **Work Hours:** [Specify daily start and end times, e.g., Monday to Friday, 9:00 AM to 5:00 PM]
* **Workdays at Office Location:** [Specify days, e.g., Tuesday and Thursday]
* **Workdays at Remote Location:** [Specify days, e.g., Monday, Wednesday, and Friday]

1. Remote Work Location

* **Primary Remote Work Address:** [Insert Address]
* **Employee Contact Information:** [Insert Contact Details]

1. Equipment and Resources

[Company Name] will provide the following equipment and resources to support this work arrangement:

* [List company-provided items, e.g., laptop, phone, software licenses]
* Employee agrees to maintain and safeguard company property in accordance with company policies.

## 2. Performance Expectations

1. Job Duties

Employee shall perform all duties and responsibilities outlined in their job description.

1. Productivity and Communication

* Employee will adhere to all deadlines and performance standards.
* Employee must remain accessible during agreed-upon working hours via [Specify communication methods, e.g., email, phone, video conferencing].
* Daily/weekly check-ins with [Manager Name] will occur [Specify frequency and method, e.g., every Monday via Teams].

1. Availability for Meetings

The employee agrees to attend mandatory meetings and training sessions as scheduled, regardless of work location.

## 3. Compliance with Policies

Employee acknowledges that they are bound by all applicable company policies, including but not limited to:

* Confidentiality and Data Protection Policies
* Health and Safety Policies
* IT and Equipment Usage Policies

## 4. Work Location Health and Safety

The employee agrees to maintain a safe and secure workspace at the remote work location. The company reserves the right to conduct safety assessments, with reasonable notice, to ensure compliance.

## 5. Modifications to the Agreement

This agreement is subject to periodic review and may be modified based on organizational needs or changes in the employee’s role. Any changes must be documented and signed by both parties.

## 6. Termination of Agreement

[Company Name] reserves the right to terminate this agreement at any time, with reasonable notice, should operational needs or employee performance require. Employee may also request to terminate or modify the agreement, subject to management approval.

# Acknowledgment and Signatures

By signing below, both parties acknowledge that they have read, understood, and agree to the terms of this Work Schedule Agreement.

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** [Insert Date]

**Manager Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** [Insert Date]

**Company Representative Signature (if applicable):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** [Insert Date]

***Disclaimer:*** *This document is provided as a template to assist employers in Ontario. It is not a substitute for legal advice. Employers should consult with a legal or HR professional to ensure compliance with applicable laws and regulations. ProSupport HR Partners assumes no liability for the use of this document.*

**Please delete the last page once you are done.**

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