Out-of-Area Telework Plan  
(AEA Teachers)

This Out-of-Area Telework Plan (Plan) supplements and does not supersede the Telework Plan already completed by the undersigned employee. The Plan identifies an alternate location for telework that is outside the Anchorage and Mat-Su Valley area. The request for out-of-area telework was based upon a statement of compelling personal reason from the employee to the Chief Human Resources Officer.

This Plan is intended to ensure that both the District and employee has a clear, shared understanding of the expectations under this Plan and under the employee’s existing Telework Plan and Agreement Form. This Plan is not a contract of employment and does not provide any contractual rights to continued employment. It does not alter or supersede the terms of the existing employment relationship.

Employee Out-of-Area Telework Information

<table>
<thead>
<tr>
<th>Employee Name:</th>
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<tbody>
<tr>
<td>Job Title:</td>
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<tr>
<td>School (or other location):</td>
<td></td>
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<tr>
<td>Principal (or other supervisor):</td>
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<tr>
<td>Address of location where telework will be performed:</td>
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District provided Equipment

The employee is expected to utilize District provided equipment including a laptop or tablet in providing instructional services to students. Any equipment issued for the purpose of telework that is in addition to the laptop, tablet or other equipment previously provided to the employee, shall be documented below.

List District equipment provided for telework below:

|                      |          |
District provided equipment is insured by the District but reasonable care of that equipment is expected of all employees. Additionally, any loss or damage of District equipment must be immediately reported.

While working from the residential or other telework location, the security and confidentiality of District and student records must be maintained.

In the event of equipment failure or service interruption, the employee must notify the principal or designee immediately to discuss alternate delivery options.

**Additional requirements**

In requesting this out-of-area telework plan, the undersigned employee acknowledges and agrees to each of the following conditions:

_____ I understand that this Plan is based upon my certification that out-of-area telework is required because of a compelling personal reason.

_____ I understand that the expectation under this out-of-area telework plan is that I will effectively accomplish my regular job duties, regardless of work location. All meetings, whether involving staff, students, or parents, will be held electronically during the period of distance delivery.

_____ I understand that I may be expected to return to work at my school location on some date prior to the end of the 2019-20 school year with 24 hours’ notice. Work duties at the school location may include but may not be limited to: staff trainings or meetings; end of year classroom closure duties; scheduled retrieval of student belongings from school or classroom; locker clean-out; or other work location activities as required by the school principal or designee.

_____ I understand that if return within 24 hours’ notice is impossible because of state quarantine, other travel restriction, or for some other reason, I will be required to take leave for each day that I am not present at the work location as required.

_____ I understand that I am solely responsible for securing and paying for internet service and for telephone service required to perform my job duties.

_____ I understand that I am solely responsible for securing and paying for any equipment not already issued to me by the district in order to perform my job duties. Such equipment may include, but may not be limited to, office furniture, printer, fax machine, scanner, and telephone and internet service.

_____ I understand and agree that this out-of-area telework plan expires on my last work day for the 2019-20 school year unless there is mutual agreement to extend the Plan.
Acknowledgement

I have read and understand the Out-of-Area Telework Plan and agree to its terms as set out above (employee initials)

Employee signature: ________________________________

date: __________________

Chief Human Resources Officer signature: ________________________________

date: __________________