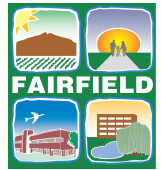


**Exhibit A**  
**City of Fairfield**  
**Remote Work Application and Agreement**



**I. Employee Information**

Name:		Department:	
Job Title:		Division/Unit:	

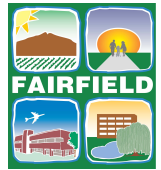
**II. Remote Work Information**

This remote work arrangement is:	
This agreement will run from:	to
Remote Work schedule (If fixed schedule selected):	
Work hours:	
Alternate work location:	

**Remote Work Equipment**

Required equipment:	Indicate if your City-owned equipment is issued to you already or needs to be provided.
<input type="checkbox"/> Computer	
<input type="checkbox"/> Printer	
<input type="checkbox"/> Fax	
<input type="checkbox"/> City network (VPN access)	
Other required supplies (please specify below):	Indicate if your City-owned equipment is issued to you already or needs to be provided.
•	
•	
•	
•	
•	

**Exhibit A**  
**City of Fairfield**  
**Remote Work Application and Agreement**



**Contact Information**

<input type="checkbox"/> Phone	Phone number:	
<input type="checkbox"/> Email	Email address:	
<input type="checkbox"/> Text	Phone number:	
<input type="checkbox"/> Other (please specify):		

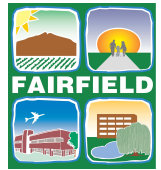
**III. EMPLOYEE ACKNOWLEDGEMENTS**

✓	I have read and will follow “The City of Fairfield Remote Work Program Policy”
✓	I understand and agree that remote work is a privilege, not a right, and is not subject to the grievance process.
✓	I understand and agree that I will maintain a safe, secure, and ergonomic work environment and to report work-related injuries to my supervisor at the earliest reasonable opportunity. I agree to hold the City of Fairfield harmless for injury to others at the alternate work location.
✓	I understand and agree that I must comply with all procedures designed to protect sensitive City information, including information that is confidential, private, personal, or otherwise sensitive while remote working.
✓	I understand and agree that remote working is not a substitute for dependent care.
✓	I acknowledge that my designated remote work location complies with all health and safety requirements.
✓	I agree to accurately record and submit the hours I work while remote working and I agree to request supervisor approval in advance of working any overtime hours (if applicable).
✓	I understand that I must use leave banks in the same manner as when working at the primary work location and will request supervisor approval in advance.
✓	I understand and agree that I must come into the primary work location on a regularly scheduled remote workday when my department requires me to do so.
✓	I understand and agree that the use of City-provided technology and equipment is to be used solely by myself for legitimate work purposes.
✓	I understand that I am responsible for tax consequences, if any, of this arrangement, and for conformance to any local zoning regulations.
✓	I understand and agree to return City of Fairfield-owned equipment, records, and materials within Choose an option. days of termination of this agreement. Additionally, within Choose an option. days of written notice, I understand I must return City of Fairfield-owned equipment for inspection, repair, replacement, or repossession.
✓	I have discussed this application and agreement with my supervisor. I agree to comply with all terms and conditions in this remote work application and agreement. I understand that my remote work agreement can be ended for a business reason at any time.

Employee Name/Signature

Date

**Exhibit A**  
**City of Fairfield**  
**Remote Work Application and Agreement**



**IV. SUPERVISOR REVIEW AND APPROVAL**

Name:	
Title:	

I certify that the above mentioned employee meets eligibility requirements for remote work. I have reviewed and approved this remote work agreement.

Supervisor Signature	Date
----------------------	------

**V. APPOINTING OFFICER/DESIGNEE REVIEW AND APPROVAL**

Name:	
Title:	

I certify that the above mentioned employee meets eligibility requirements for remote work. I have reviewed and approved this remote work agreement.

Department Head/Designee Signature	Date
------------------------------------	------

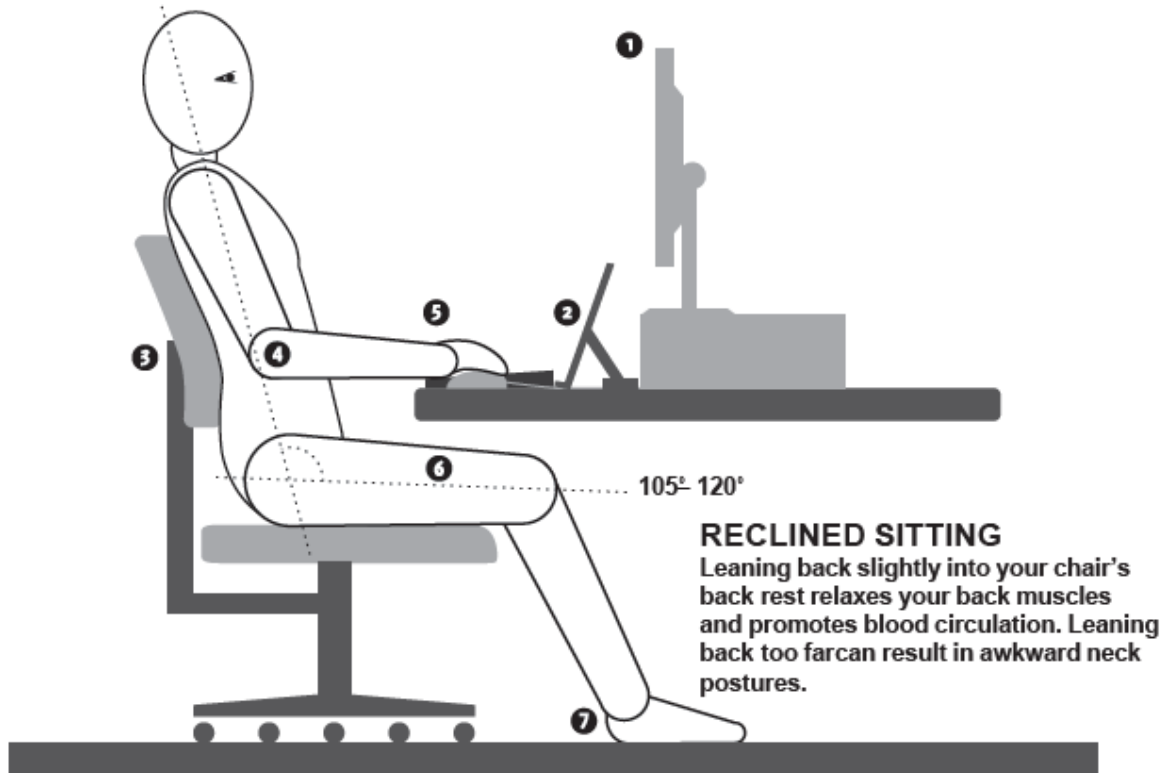
*Upon full execution of the "Remote Work Application and Agreement", please forward original to Human Resources.*

***For Human Resources Use***

- |  |
|--|
| <input type="checkbox"/> Agreement filed in Employee Personnel File<br><input type="checkbox"/> Copy of Agreement provided to IT |
|--|

Exhibit B  
Ergonomic Considerations

# A USER FRIENDLY WORKSTATION



## ✓ CHECKLIST FOR A USER FRIENDLY WORKSTATION:

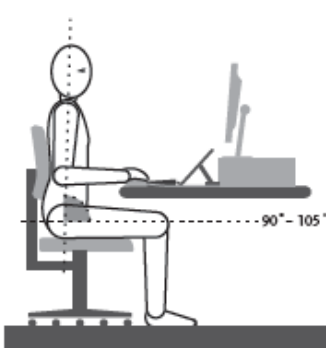
- |   |   |
|---|---|
| <b>1</b> ✓ Top of screen at eye level; lower for bifocal wearers. Screen distance at arm's length (18 – 36")                  | <b>5</b> ✓ Wrists straight (neutral). Padded, movable wrist rest, same height as front of keyboard (Do not use wrist rest while keying) |
| <b>2</b> ✓ Document holder centered between monitor and keyboard or next to screen  | <b>6</b> ✓ Knees at or below hip level. Ample legroom under work surface  |
| <b>3</b> ✓ Chair backrest provides firm lower back support. Chair back and seat easily adjustable for height and tilt by user | <b>7</b> ✓ Feet rest firmly on floor or foot rest   |
| <b>4</b> ✓ Keyboard height promotes relaxed arms with forearms parallel to floor. Mouse / pointing device next to keyboard    |   |

## Exhibit B Ergonomic Considerations

### ALTERNATIVE POSTURES AT A USER-FRIENDLY WORKSTATION

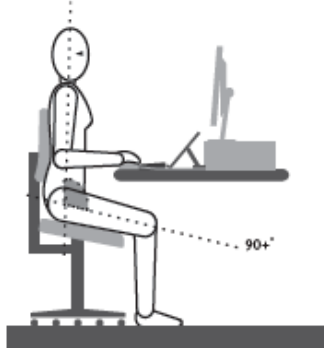
*Sitting for long hours in one position—no matter how good your posture is—can be fatiguing and lead to discomfort.*

- Vary your position throughout the day.
- Try out some of the postures below to find out which are comfortable to you.
- Rotate your job tasks to avoid constant keyboard work.
- Take frequent, short stretch breaks to get up and move around.



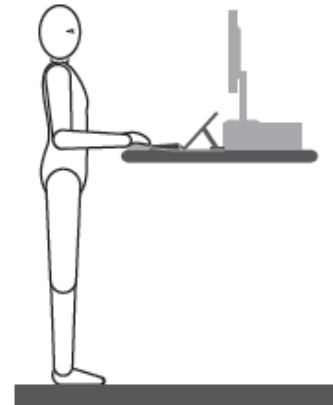
#### UPRIGHT

Sitting upright with your elbows, hips, and knees bent at right angles can fatigue your back muscles over time and lead to slouching.



#### DECLINED

Raising your chair's seat and tilting the front of it downward slightly will open your hip angle. This will also be easier on your back, but may not be comfortable if you have knee or foot problems.



#### STANDING

Prolonged standing can also be fatiguing. Prop one foot up on a low footrest occasionally to shift your weight. Alternate positions include using a counter height chair or height adjustable sit/stand workstation.

### Ergonomic Tips for Laptop Users

*A laptop's compact design, with attached screen and keyboard, forces laptop users into awkward postures. When the screen is at the right height, the keyboard position is too high; when the keyboard is at the right height, the screen is too low. This creates an ongoing trade-off between poor neck/head and hand/wrist postures. The following tips are recommended during long term use of a laptop (more than an hour).*

- Maintain a neutral neck posture by placing the top of the screen at about eye level
- Use an external monitor, laptop stand or place your laptop on a stable support surface, such as a monitor riser, so that the screen height can be adjusted
- Use a laptop stand if you don't use an external monitor. Attach an external keyboard and mouse at or slightly below elbow height.
- Make sure to keep an upright posture. Don't hunch your shoulders or lean your body towards your laptop screen.