**Company XYZ Working from Home Agreement**

In accordance with the *Working Hours* and *Flexible Working Arrangement Guidelines*, found in the Company XYZ Employee Handbook, this Agreement must be completed in order to authorize working from home.

In addition, Working from Home will only be authorized after the below Agreement is completed and your home workstation meets all of the below requirements or otherwise approved by your manager.

Work from home workstation requirements:

 You have a desk or table as a workstation for computer use at home.

 You have a fully adjustable chair for your workstation.

 You have adequate lighting for the tasks being performed.

 Your computer and other electrical equipment required for work are protected by an electrical safety switch.

 If your role requires a large number of phone calls, you have a headset or speaker on your computer.

Please note that you will not be able to work from home until the requirements listed are met or otherwise approved by your manager. The Company will not be responsible for funding or organizing any modifications; employees will be required to coordinate any personal modifications for their home working space.

If you have a pre-existing injury that may be aggravated by performing tasks at the home office, please list below if you have seen a health professional and what, if any, recommendations were made.

By signing below, I confirm that I have read and agree to follow the *Working Hours* and *Flexible Working Arrangement Guidelines*, found in the Company XYZ Employee Handbook and have a workstation at home that meets all of the above requirements.

**EMPLOYEE NAME:** <<Variable\_var\_full\_name>>

**DATE:** <<Context\_today>>

**EMPLOYEE SIGNATURE:**

