

Arizona Department of Administration  
**ALTERNATE WORK OPTION AGREEMENT**

**These conditions for alternate work arrangements must be agreed upon by the employee and the employee's supervisor**

**I am requesting the following Alternate Work Option:**

**Telework Schedule (TWS)**

My telework day will be

**Telework (TWS) and Flexible Work Schedule (FWS)**

My telework day will be

My scheduled hours will be

**Compressed Work Schedule (CWS)**

My CWS days will be

My scheduled hours will be

The following are my typical work assignments:

Proposed start date for Alternate Work Options Program

Proposed end date for Alternate Work Options Program

**I will be utilizing the following devices during my telework shifts:**

Personal Device

State Issued Device

If I have selected either telework option, I have also completed and submitted a Telework Agreement.

If I will be teleworking and I will be using my own personal device, I agree to adhere to all State cyber security control best practices (per page 2 of this Agreement). I understand that if I am using my personal device I must not have elevated access privileges.

If I will be using a State issued device while teleworking, I agree to bring the device to work on a weekly basis so that State security protections can be updated and system patched.

If I am utilizing a telework option I agree to respond promptly and appropriately to all business and customer service needs during my telework shift. I understand that failure to do so at any time may lead to, at a minimum, cancellation of this agreement.

I agree to adhere to all applicable State policies and State Personnel Rules while participating in the Alternate Work Options Program.

I have read and understand the Addendum to the Alternate Work Options Agreement provisions from Page 2 of this Agreement and will follow all its stated conditions.

Employee's Signature

Date

Employee's Printed Name

Supervisor's Signature

Date

Supervisor's Printed Name

Arizona Department of Administration  
**ADDENDUM TO ALTERNATE WORK OPTION AGREEMENT**  
**Home Office Best Practices**

- You must have an internet connection at home.
- To the maximum extent possible, use a State-issued laptop while teleworking to ensure that your device is maintained with the most current software updates and security patches. If you do not have a State-issued laptop, speak with your supervisor to see if receiving a State-issued laptop is an option.
- Do not share or send business information using personal accounts.
- Ensure that your home network uses encryption.
- Do not allow non-State employees to use your State issued laptop.
- If using a personal computer, use unique passwords. Do not use the same password for multiple computers or networks.
- If using a personal computer, set a screen saver or idle lock-out timer and use a password to unlock.
- Do not share your passwords with anyone.
- Physically protect your device from theft and unauthorized access.
- Do not download confidential State information to your personal device.
- If your State computer is lost/stolen or compromised, contact ASET Security immediately.