Procedure to Request an Alternative Work Arrangement

1. Complete a *Request for an Alternative Work Arrangement* form

2. Scan, fax (843.661.1202), or e-mail form to Vice President for Administration and Planning Charlene Wages (cwages@fmarion.edu)

3. Requestors will be notified after consultation with the respective supervisor, department chair, or dean to determine feasible alternative arrangements.

4. If the alternative work arrangement takes place away from campus, a *Telecommunications Agreement* will be signed.

*Staff Request for an Alternative Work Arrangement*

1. Describe the alternative work arrangement that you are requesting.

2. Have you discussed your preferred alternative work arrangement with your supervisor?

3. Is the request related to an existing physical condition? If yes, answer the following:
   a. Describe the condition and indicate how it will interfere with your ability to carry out your duties in the usual location.
   b. Are you currently being treated for this condition? If yes, please describe and give the name of the primary healthcare provider.
   c. Include the most recent office notes from your primary healthcare provider.

4. If the request is not related to an existing physical condition, please describe the situation which is causing you to make this request.

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1 The policies and procedures for an Alternative Work Arrangement are consistent with the *Telecommunications Policy* of FMU and the guidelines established by the SC Division of Human Resources.