



Out-of-State Work Location Request Form for Current Employees

The out-of-state work location request form must be submitted by the first-level supervisor with Vice President/Designee approval for an employee to work in a state other than Alabama.

Form Status: New Location Request Updated Location Request

Requester Information (First-Level Supervisor):

Requester Name: _____
 Requester Position/Title: _____
 Requesting Department: _____
 Email Address: _____
 Campus Phone Number: _____

Position Information for Current Employee:

Person's Full Name: _____
 Position Title: _____
 Position Number: _____
 Position Category: Staff Regular/Renewable FT Temporary FT
(check all that apply) Faculty Regular/Renewable PT Temporary PT
 Employee Classification Code: _____
 Annual Salary: _____
 Campus Wide ID #: _____
 Email Address: _____

Proposed Start Date for Out-of-State Location: _____
Proposed End Date for Out-of-State Location: _____

1. What primary job duties will the employee be performing in this remote position? As the supervisor, provide a description of your job expectations for this position and/or attached a copy of the position description below.

Attachment (Optional):

2. What systems, software, databases, etc. (UA or otherwise) will this employee access while working? Please be as specific as possible.

3. Physical Address of Residence in out of state location:

Street Address

City

County

State

4. Physical Address of Work Location:

____ Check if same address as residence.

Street Address

City

County

State

5. Identify the primary flexible work location(s) where this employee's work will occur and describe the primary working environment for this position. If other work locations apply that are not listed in the addresses above, please specify.

6. Will the employee be working with hazardous materials on the job?

Yes No

7. Will the employee be working outside of their residence as part of the job?

Yes No

If you answered 'Yes' to questions #6 or 7 above, please provide more details:

8. Provide justification or reason for this employee to work outside of Alabama, including why this position cannot be filled with an employee working in the state of Alabama.

REVIEW PROCESS:

The out-of-state work location request form must be signed by the employee's immediate supervisor and the Vice President or Designee. The request will be reviewed by a committee including representatives from the Department of Human Resources, Office of Counsel, Office of Compliance, Ethics, and Regulatory Affairs, Office of Risk Management, and Tax Office. All committee reviewers must approve the out-of-state location for the arrangement to move forward.

FOR STAFF POSITIONS: If the out-of-state location request is approved, then supervisor must submit a Flexible Work Agreement in Everest k2 and attach a copy of this completed DocuSign.

Requesters from College or Division:

First-Level Supervisor Name: _____ Date: _____

Signature: _____

Vice President/Designee Name: _____ Date: _____

Signature: _____

Out-of-State Work Location Compliance Review Decision: Approve Deny

Signature: _____ Date: _____