I. Policy Statement
This policy defines and describes the nature and availability of alternative work scheduling opportunities for staff employees of the University of Scranton.

II. Reason for Policy
Workplace flexibility is a valuable tool in merging the goals of meeting modern business needs and supporting employees' balance of personal and professional priorities and commitments. Such work arrangements can provide departments with opportunities and scheduling that best meets the needs of those they serve, and to use resources more efficiently and productively. This alternative work schedule policy is designed to guide the appropriate implementation of alternative work arrangements that may enhance the effectiveness of business functions, and which support the quality of the work-life of University staff.

III. Entities Affected By This Policy
Benefits-eligible, full-time staff that have successfully completed their probationary hiring period, have a record of satisfactory performance, and have an absence of disciplinary issues may be eligible for alternative work schedules. Ongoing eligibility is dependent upon there being no negative change in performance and no instance of disciplinary action for the employee.

A flexible work arrangement is not a right of employment; certain staff positions, due to the nature of their work and degree of engagement on campus, may be ineligible for alternative scheduling opportunities; specific excluded staff categories are listed below.

Department heads and divisional vice presidents will determine whether certain types of alternative scheduling are not available within their departments/divisions due to the nature of the work of those departments, divisions, or individual staff positions. Additionally, there may be times when a department’s or division’s needs require that certain positions follow flexible work schedules as a normal part of business. Any schedule modification made under this policy is not to be considered permanent.

Excluded staff positions:
- Campus police and safety officers
- Part-time employees

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1 Original issuance as a one-year pilot, with review of pilot scheduled for President’s Cabinet in Summer 2013.

Originally approved by President’s Cabinet May 29, 2012.
Final approval by President’s Cabinet October 15, 2013.
IV. Website Addresses for this Policy
http://www.scranton.edu/Governance/university-policies%20.shtml
http://scranton.edu/hr/employment/alternativeworkschedule.shtml

V. Related Documents, Forms, and Tools
Staff handbook
Alternative Work Schedule Request Form (XI: Appendix A)

VI. Contacts
Contact Human Resources with questions about the content or application of this policy. Individual staff should contact their supervisor with questions regarding their eligibility to take part in alternative work scheduling and what scheduling may be available within their department.

VII. Definitions & Types of Alternative Schedules Available
Alternative work schedule: an arrangement whereby a staff employee may follow a work schedule that differs from the standard.
Benefits-eligible Staff: non-faculty employees who work at least full time.

Standard Work week:
A minimum of 35 to 40 hours for full time employees. Non-exempt employees are paid hourly and work 35 or 40 hours per week. Exempt employees are salaried, are expected to be available during all normal business hours and to work as required by the duties and responsibilities required of their position. Typically this is a minimum of 40 hours per week.

Types of Alternative Work Schedules Available at the University:
- Compressed Work Week: alternative scheduling that compresses a work week into fewer than five days.
- Flex Time: alternative scheduling that alters the work start and end times from the standard; however, the employee is required to maintain a standard number of work hours.
- Telecommuting: alternative work scheduling that enables an employee to work from a remote location one or more days per week.
- Nine/Ten/Eleven-month and reduced work schedules may be available for certain positions with the approval of the supervisor, division head and Human Resources. Some positions may be changed to nine/ten/eleven-month or reduced hour schedules based on the needs of the University.

VIII. Responsibilities
1. Staff member: staff members wishing to explore alternative work scheduling must submit a formal written request to their supervisor, copying their divisional vice president. Staff member is expected to maintain satisfactory work performance for the duration of the alternative schedule.
2. Supervisor: initial review and decision to approve/decline the alternative scheduling request. Reviews the employee’s request in context of departmental needs and institutional business functions, including technology needs and limitations. Must review office coverage and/or work assignment impact. Reviews the staff member’s performance to ensure its
quality for the duration of the alternative schedule. If supervisor is the department head, review and make decision to approve/decline the scheduling request.

3. Department Head (if not supervisor): Review and decision to approve/decline the alternative scheduling request following supervisor review and recommendation.

4. Divisional Vice President: Review and decision to approve/decline the alternative schedule request following department head review and recommendation.

5. Human Resources: In consultation with divisional vice president, decision to approve/decline the alternative schedule request based on the provisions outlined in this policy and consideration of other University employment policies.

In addition to the above responsibilities, the employee and their supervisor should take steps to ensure that those impacted by the alternative schedule are informed of the change and that steps are taken to resolve any challenges this may emerge. Supervisors and/or department heads should review all requests for alternative schedules in context of other alternative schedules that may currently exist within their department to see if changes to any and all requests and schedules can be made to best accommodate employee needs and office workload and coverage. Employees with an alternative work schedule are expected to adhere to all other University policies and procedures that relate to absence from work.

**IX. Procedures**

The following procedures describe the process for requesting, maintaining and concluding an alternative work schedule.

A. Request/Approval Process:

1. Staff members interested in exploring alternative work scheduling for whom they may be eligible must contact their supervisor to determine their eligibility and discuss alternative scheduling options. If the employee wishes to formally pursue alternative scheduling of any kind, they must complete a *Request for Alternative Work Schedule Form* (Appendix A) and submit it to their supervisor, sharing a copy with their divisional vice president.

   a. The staff member must provide an explanation supporting why the alternative work schedule is needed/desired, selection of the type of alternative schedule the employee is seeking, and summary of how the employee will assure his/her performance and/or coverage of needed campus presence will be maintained at a satisfactory level.

2. The supervisor must review the request, determining whether the request is possible given the needs of the department. If the request is approved by the supervisor, the request is forwarded to the staff member’s department head (if not the supervisor) for review and approval. If the request is approved by the department head, it is then forwarded to the divisional vice president for review and approval.

   a. If the request is approved at all levels, it is submitted to the Office of Human Resources for final review and approval, in consultation with the divisional vice president.

   b. If the request is not approved at the supervisor, department head, or divisional vice president level, the declined request is to be returned to the employee, with a copy submitted to Human Resources.
B. Maintenance of Alternative Work Schedule

1. The employee is responsible for maintaining the required number of hours worked and quality of performance. The employee must be accessible to the supervisor and colleagues during the work hours as established by the alternative schedule.

2. The employee’s supervisor is responsible for regular review (with no more than six months between each review) of the effectiveness of the alternative work schedule and satisfaction with the employee’s performance. It is recommended that this review take place within the standard review checkpoints that are part of the University’s performance management process.

C. Conclusion or Termination of Alternative Work Schedule

1. Should the rationale/reason for the original alternative schedule request cease to exist, or the alternative work schedule be terminated by the supervisor, the staff member is expected to return to their normal work schedule. The supervisor will communicate this change to the divisional vice president and Office of Human Resources.

2. Should the employee wish to conclude the alternative work schedule for any reason, they must notify their supervisor, who will communicate the change in schedule to divisional vice president and the Office of Human Resources.

3. Should the supervisor wish to terminate the alternative work schedule due to employee performance, office/departmental coverage, or workload needs, they must notify the employee in writing at least two weeks prior to conclusion of the alternative schedule, with copies of the notification and its rationale submitted to the divisional vice president and Office of Human Resources.

Some situations may be better addressed through other options such as the Family Medical Leave Act, or short or long-term disability. Contact the Office of Human Resources for more information on these types of employee leaves.

X. Amendment of this Policy

1. The University reserves the right to alter, amend, or withdraw this policy at any time.
The University of Scranton
Alternative Work Schedule Request

**Part A: Employee Information:**

Employee Name:________________________________________________

RoyalID: ___________________________ Supervisor: ________________________________

Department: ___________________________ Department Phone: _______________________

Employee Phone (campus): ________________ Employee Phone (alternate): ________________

Employee email: _____________________________

Employee Classification (check one) : ____________Exempt ______________Non Exempt

**Part B: Request Information:**

Reason for Request:
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Type of Alternative Work Schedule Requested (check one):

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<tr>
<th>Compressed Work Week</th>
<th>Flex Time:</th>
<th>Telecommuting:</th>
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Nine/Ten/Eleven-month

Flexible Schedule Proposed Start Date: ________________________________

Flexible Schedule Proposed End Date (if known): ________________________________
Proposed Work Hours (if compressed work week or flex time):

<table>
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<tr>
<th>Work Day</th>
<th>Work Hours</th>
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Part C: Narrative Description of Employee’s Plan for Maintenance of Alternative Work Schedule (Management of Employment Duties and Performance) [may be submitted as an attachment].

______________________________  __________________________________________________
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I have read and understand the University of Scranton’s Alternative Work Schedule Policy, and understand that this alternative schedule may be suspended or terminated at any time. I have discussed with and understand the expectations for the successful maintenance of this alternative schedule with respect to my employment duties and responsibilities as set forth by my supervisor.

Employee Name (print)____________________  Employee Signature____________________

Date ________________________________
Part D: University Approvals

1. Supervisor ______________________ Date ____________________

Request: Approved / Denied (circle one)

Supervisor Notes:

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

2. Department Head (if not supervisor) ______________________ Date ____________________

Request: Approved / Denied (circle one)

Department Head Notes:

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

3. Vice President ______________________ Date ____________________

Request: Approved / Denied (circle one)

Vice President Notes:

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

4. Office of Human Resources ______________________ Date ____________________

Request: Approved / Denied (circle one)

HR Notes:

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

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