COLUMBIA UNIVERSITY FULLY REMOTE EXCEPTION PROPOSAL FORM

The Fully Remote Exception Form is used to request an exception to Columbia's onsite or Hybrid Work Model and, if approved, permits an employee to work on a fully remote basis, usually for a set period of time. This form should be used by <u>all employees</u> (including VHOs) requesting a fully remote work arrangement. Employees working fully remotely should be aware that living and working outside of New York State may have tax implications; Columbia University does not provide tax advice to its employees. Students and non-student Casuals may never work fully remotely. For more information about Columbia's Flexible Work Policy, please go <u>here</u>.

To be completed by the Unit:
Date request submitted:
Employee Name:
Job Title:
Full Time: 🗆 Part Time: 🗆
Employee ID:
Employee Email:
Unit Name (administrative department):
Name of Employee's Manager/Supervisor:
Name of Unit's Executive Leadership who has approved this arrangement:
Remote Work Location Address:
Fully Remote Work Arrangement Proposed Start Date:
Fully Remote Work Arrangement Proposed End Date (if known):

Instructions

- Questions 1, 2, 3, 4, 5, and 6 below are to be completed by the employee's Unit. When completed, the form should then be forwarded to CUHR/the Vice President, Human Resources, or his/her designee, to the CUIMC Chief Human Resources Officer or his/her designee, or to Associate Provosts Carmen DeLeon (cd28@columbia.edu) or Zeid Sitnica (zs2152@columbia.edu) in the Division of Academic Appointments, Office of the Provost for submission to the Provost's Remote Work for Academic Personnel Committee,
- **2.** The Vice President of CUHR, the Chief Human Resources Officer, CUIMC; or the Provost's Remote Work for Academic Personnel Committee will indicate their decision in Section I.
- **3.** If the proposal is approved, the employee, the employee's manager and the Unit's Executive Vice President or Dean should sign, acknowledging terms, in Section II.
- **4.** Once complete, the entire document should be returned to the employee's manager who needs to complete Section III periodically (if applicable)
- 5. For Morningside Only: request reviewed by Department's SR. HRBP (if applicable)
 - Name: Date:

To be answered by the employee's manager:

- 1. Is this a legacy case? ____
 - a. If so, in what year did this arrangement start?_____
 - b. If this is a legacy case, did the Unit rely on any formal policy or can the Unit provide any documentation upon which it relied when this arrangement was initiated? If so, please attach to this request.
- **2.** Is the state in which the remote employee would work one in which the University is registered?
 - Yes No
- **3.** Please provide justification for this fully remote work arrangement. (Please feel free to attach additional pages.)
- **4.** Please attach the employee's job description (approved by Unit 's Senior Human Resources Business Partner or Executive Vice President or Dean).
- 5. What communication tools/equipment will the employee be using to support their remote work arrangement? Who will provide these?

6. What is the proposed salary if employee works fully remotely:

Please estimate what the employee's salary would be if the employee were located
in New York:
For information about salary differentials, please contact your Senior Human
Resources Business Partner.
Is the employee in a non-immigrant visa status? Ves No

7. Is the employee in a non-immigrant visa status? Yes No If yes, indicate Visa type:

Please be aware that J-1 status employees are not eligible for fully remote work under Federal regulations. Employees who are in J-1, H-1B, O-1, TN and E-3 status currently working in a hybrid work arrangement or seeking approval for a hybrid work arrangement must notify the ISSO.

I. Full remote arrangement decisions CUHR, CUIMC HR, or Provost's Remote Work for Academic Personnel Committee: Proposed remote work is (check one):

- □ Approved
- □ Declined
- □ Modify and resubmit

If the request needs revision or is declined, please describe revision needed and/or business rationale below. (Please feel free to attach a page to this document.)

Signature:	Date:
PRINT AND SIGN NAME	
Vice President of Human Resources or his/her designee, the CL Resources Officer or his/her designee, or Provost's Remote Work Committee or his/her designee.	
II. Employee, Manager and Unit's Executive Leadership	Consent to Terms
I understand that approval of this proposal does not constitute as a contract of employment. Columbia University employment r for non-academic personnel. This fully remote arrangement is n or override Columbia University employment policies at any time.	elationships are "at will"
Termination Date of Fully Remote Work Arrangement (if know	wn): Date:
Employee Signature:	Date:
PRINT AND SIGN NAME	

[Version 11/14/2024]

Manager (Principal Investigator) Signature:

PRINT AND SIGN	Date:	
		tor of Institute/Center Signature (if applicable):
PRINT AND SIGN N	Date:	
Dean/Executive Vic	e President Signature (if applicable):
PRINT AND SIGN I		
Administr schedule r	ation or NUSS Support	s manager if employee is an Officer of Staff: The University requires that managers ird and sixth month, and periodically at least
Reassessment date:		

All remote work arrangements must be approved in advance. Final approval is at the discretion of the offices referred to above.

The approved proposal forms and any backup documentation for all fully remote arrangements should be held in the Unit. A signed and approved copy should be forwarded to and kept by the employee.

Please provide chartstring information below. The administrative fee will be charged at the time of approval and annually thereafter. Only one chartstring can be charged; the fee cannot be shared over multiple chartstrings.

Chartstring:	
Business Unit:	
Account:	
Department: PC	
Business Unit:	
Project: Activity:	
Initiative:	
Segment:	
Site:	
Fund: Function:	