**COMPANY NAME OR LOGO**

**Authorization Form for Remote Work and Access**

**Remote Location and Access Information**

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Employee Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s Reason for Request (or simply state “Employer Requirement”):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Requested/required **hours/dates** at alternate worksite:

**Hours:** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_From: ­­\_\_\_\_\_\_\_\_\_To: \_\_\_\_\_\_\_\_\_Total Hours: \_\_\_\_\_\_\_\_\_

 Month/Date/Year

**[OR]**

**Days:** From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*Fill in Dates)*

Month/Date/YearMonth/Date/Year

*Other information related to your alternate worksite (if Company equipment is transported, please complete Company Property Acknowledgment Form):*

Employee Signature Date

**Supervisor Approval**

 Approved Rejected

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Signature Date: