

## Aultman Work from Home Request

**NOTE – ONLY Ohio is an approved location (unless approved by HR)**

See Telecommuting Policy for more information

### Colleague Information

Colleague Name:  Effective Date:   
Colleague ID:  Email:

### Home Address

Street Address 1:  Street Address 2:   
City:  State:  Zip:

### Position Information

Department Name:  Department Number:   
Manager:  Timekeeper:   
Current Work Location:

### Proposed Work from Home Timeframe

Proposed Start Date:  Proposed End Date:

### Colleagues New Primary Work Location

Home: \_\_\_\_\_

Office: \_\_\_\_\_

Split/Primary Home: \_\_\_\_\_

Split/Primary Office: \_\_\_\_\_

### Approvals

Manager:  Vice President:

**For Payroll Use Only**

New Taxing Jurisdiction/Rate:

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Form must be completed and resubmitted if there are any changes to the above location. Submit the completed form by creating a HR help ticket via the employee portal. Remote colleague's must complete the Telecommuting policy attestation and the attestation for the LMS training for KRONOS.