Middle Georgia State University

Flextime Agreement

This flextime agreement (hereafter "agreement"), effective (date)	_, is between
(employee name)	
(hereinafter referred to as "Employee"), an employee of the Middle Georgia State The parties agree as follows:	University

Scope of Work

Employee agrees that unless a condition of employment, that flextime is voluntary and may be terminated, by either the Employee or Middle Georgia State University with or without cause.

Other than those duties and obligations expressly imposed on Employee under this agreement, the duties, obligations, responsibilities, and conditions of Employee's employment with Middle Georgia State University remain unchanged. Employee's salary and participation in the retirement benefit and Middle Georgia State University-sponsored insurance plans shall remain unchanged.

This agreement shall be construed, interpreted, and enforced according to the laws of the State of Georgia.

Work Hours and Leave

Employee agrees that work hours will conform to the terms agreed upon by Employee and Middle Georgia State University.

Employees subject to mandatory overtime agree to obtain advance supervisory approval before performing overtime. Working overtime without such approval may result termination of the flextime option and/or appropriate action.

Employee agrees to obtain advance supervisory approval before taking leave.

Work Schedule and Work Status

Employee agrees to develop a work schedule with Employee's supervisor and Employee's supervisor must agree, in advance, to any changes to Employee's Work Schedule. Employee agrees to provide department timekeeper with a copy of Employee's Work Schedule.

Employee agrees to perform only official duties and not to conduct personal business while on work status during the flextime hours, regardless of direct supervision.

Middle Georgia State University

FLEXTIME AGREEMENT

The Employee's flexible work schedule shall be as follows:

Day	Start Time	End Time
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Work Performance

Employee agrees to provide regular reports, as required by the supervisor to help evaluate work performance. Employee understands that a decline in work performance may result in termination of this agreement by Middle Georgia State University.

Other Action

Nothing in this agreement precludes Middle Georgia State University from taking any appropriate disciplinary or adverse action against Employee if Employee fails to comply with the provisions of this agreement or terms and conditions of employment.

Participation in Studies and Reports

Employee agrees to participate in studies, inquiries, reports, or analyses relating to flextime at Middle Georgia State University direction.

Term of Agreement														
This	Agreement	shall	be fo	or the	period	of	(start	date)					thr	ough
	((not to	exceed	d end	of curren	t fis	scal ye	ar) and	may	be	renewed	in	one	year
period	ds or shorter	at the o	liscreti	on of th	ne superv	isor	if requ	ested by	y the I	Emp	loyee.			

Provisions for Cancellation of Agreement

Employee's participation in the flextime program is voluntary and is available only as long as Employee is deemed eligible at Middle Georgia State University's sole discretion. Flextime is not an entitlement or benefit of employment. Either party may cancel Employee's voluntary participation in flextime, with or without cause, upon reasonable notice thereof, in writing, to the other. This agreement is not a contract of employment and may not be construed as one.

Middle Georgia State University

FLEXTIME AGREEMENT

I have read and understand this Agreement and agree to abide by and operate in accordance with the terms and conditions described in this documents. I agree that the sole purpose of this agreement is to regulate flextime and that it does not constitute an employment contract nor an amendment to any existing contract and may be canceled at anytime.

Flextime Participant (Print Name)	Supervisor (Print Name)
Flextime Participant Signature	Supervisor Signaure
Flextime Participant Date	Supervisor Date
Divisional Vice President (Print Name)	
Divisional Vice President Signature	
Date	

Vice-President to forward document to Human Resources.