

## Office Professional Inclement Weather Work Log

| Employee ID#: _                      | N                       | [ame:   | Worksite:  |               |
|--------------------------------------|-------------------------|---|--|---------------|
|                                      |                         |   | ort leave. With supervisor approval, two hundred sixty (260) day employees m<br>worked remotely will be logged and submitted to the supervisor and Human       |               |
|                                      | not logged on this      |   | work, 2) enter emergency or vacation leave, or 3) contact their supervisor to re<br>n employee's regularly scheduled workday must be reported as an absence in |               |
| EMPLOYEE INST<br>accomplished and ti |                         | ord time spent working in half day  | increments and describe the work completed. Be specific when describing the  | e work        |
|                                      |                         |   | ne district has a fiduciary responsibly to document the reason each employee posed "work from home plan" for each employee and maintain such records           |               |
| Date                                 | Hours                   |   | Description of Work  |               |
|                                      |                         |   |  |               |
|                                      |                         |   |  |               |
|                                      |                         |   |  |               |
|                                      |                         |   |  |               |
|                                      |                         |   |  |               |
|                                      |                         |   |  |               |
| EMPLOYEE'S CERTIFIC                  | CATION: I hereby certif | y that I have worked the time recorded abou   | ve and completed the work detailed above.  |               |
|                                      |                         | tify that I have consulted with the employed<br>I for a period of three years for audit propo | e(s) listed above, agree that the proposed scope of work is reasonable and can be accomplished<br>ses.   | l and approve |
|                                      |                         |   |  |               |
|                                      |                         |   |  |               |
| Employee Signature                   |                         | Date  | Supervisor Signature   | Date          |
| Employee Signature                   | •                       | Date  | Supervisor Signature   | - Jaic        |