

Southeastern Louisiana University Alternate Work Arrangement Procedures

1. Employee will complete the Alternate Work Arrangement Request Form including Physician Contact Information if underlying medical condition is purpose of request. Employee should have the Physician fill out the form if the employee does not have any other supporting documentation for the medical condition. Employee should indicate specifically what alternate work arrangement they are requesting: modification of work schedule or modification of the physical environment. They should describe in detail if they are requesting to telework, to work a flexible schedule, a reduction in hours or physical environment changes. Employee should also include the duration of time this request is being made.
2. Supervisor will recommend if alternate work arrangement is acceptable for position and department success. The supervisor also has space on the form to make notes regarding accommodations and/or physical changes that could be made to assist the employee, changes to what the employee is asking, or notes to HR to help in this decision. The supervisor will sign and date the form.
3. The completed form is then forwarded to Human Resources for processing. Human Resources will reach out to employee, supervisor, and/or physician for questions or any missing information. Human Resources review team meets weekly to process requests. If more guidance is needed, the EEO/ADA Compliance Officer and the Environmental Health and Safety Director is consulted.
4. Employee and direct supervisor are notified via email if request is approved/denied. If the request is a physical environment request the Environmental Health and Safety Director is notified. A copy of the form is sent to the EEO/ADA Compliance Officer and employee file. A list of all requests is maintained by the HR Department.
5. HR will send an email to the employee and supervisor when/if the end date of the accommodation is approaching.