**Department/Unit**

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**Building(s)/Location(s)**: If the department/unit is located in more than one building, please list each location.

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**Point(s) of Contact**: If follow up is needed, please list the best people to contact.

|  |  |
| --- | --- |
| **Name** | **Title** |
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\*\*\*\*\*\*\*\*\*\*

**IMPORTANT CONSIDERATIONS**

* We strongly encourage the continuation of telecommuting work arrangements throughout the fall semester.
* Sign templates will be provided to post contact information in reception areas and front offices. These signs can be used to instruct faculty, students, and staff that are on grounds who to contact someone working remotely.

**Office Management**

*Please use this space to describe your approach to maintaining office and customer service operations.* ***If this does not apply to your department/unit, please leave this section blank.***

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**Staff Scheduling Summary**

*Please provide a general summary of the staff work arrangements in your department/unit, i.e. % of staff working remotely full time, on grounds or examples of special work schedules arrangements.*

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**Anticipated PPE & Cleaning Supply Needs**

*To assist with the central procurement of hand sanitizer and spray disinfectant, please share the anticipated quantities for August – December to manage work spaces and shared spaces (not classrooms). Please approximate your needs.*

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| --- | --- |
| **Hand Sanitizer Liquid and Gel** |  |
| **Spray Disinfectant** |  |

**Visitor Policy Considerations**

*While the visitor policy has not been finalized, visitors will largely be discouraged. Visitors will be defined broadly to include anyone that is* ***not*** *a faculty, student, or staff member. Please use this space to describe any special visitor considerations/concerns.* ***If this does not apply to your department/unit, please leave this section blank.***

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**Review & Feedback Notes**

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| --- | --- |
| **Date:** |  |
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