

Franchise Telecommuting Policy

Date: [Insert Date]

To: [Employee Name]

From: [Franchise Owner/Manager Name]

Subject: Telecommuting Policy Agreement

Dear [Employee Name],

As part of our commitment to providing a flexible work environment, we are pleased to introduce our Telecommuting Policy. This policy outlines our expectations and guidelines for employees who wish to work remotely.

1. Eligibility

Employees must meet the following criteria to be eligible for telecommuting:

- Tenure of at least [insert duration]
- Performance reviews must be satisfactory.
- Approval from the direct supervisor.

2. Work Hours

Employees should be available between [insert hours] for communication and meetings. Any change in work hours needs prior approval.

3. Equipment and Technology

Employees are responsible for ensuring a suitable work environment and must have access to necessary technology to perform their duties.

4. Communication

Regular communication with your team and management is essential. You are expected to participate in weekly check-ins.

5. Performance Monitoring

Your performance will be continuously evaluated based on outcomes and deliverables.

Please acknowledge your understanding of this policy by signing below.

Sincerely,

[Franchise Owner/Manager Name]

[Employee Signature] [Date]