



T2200 Attestation Form

This form should be submitted to Human Resource Services before April 17, 2024.

First Name	
Last Name	
Personnel No.	
Job Title	
Department/Faculty	
Email	

I confirm the existence of an agreement between myself and the Department/Faculty indicated above that I would work remotely during the period from _____ to _____, for ____ percentage of working time during the aforementioned time period.

This agreement takes the following form:

- Formal written agreement (agreement attached)
- Informal agreement (e.g., email - documentation attached)
- Oral agreement (confirmed by department head signature on this document)
- Past practice known to department (confirmed by department head signature on this document)

Department Head Name	
Department Head Signature	

EMPLOYEE AUTHORIZATION:

I confirm that the information given in this form is true, complete, and accurate. I understand that claiming a deduction for home office expenses on my personal income tax return is my responsibility and that the University does not take any responsibility for what I make or do not make as a deduction, or for the items claimed, or their value, or anything else relating to such deduction, on my personal income tax return.

Employee Signature	
Date	