



Create and Manage  
a Flexible Workplace!  
Reap Bottom Line Benefits!  
Engage Employees!

### Best Practices Form

As part of the Flex-Options project, we are interested in sharing your workplace flexibility programs and best practices on our Website at [www.flexoptions.org](http://www.flexoptions.org). Please complete the following information and email this form to your Flex-Options Contractor or Regional Administrator.

Brief company profile.

Describe your flexible workplace culture, program(s) or practice(s).

What workplace flexibility challenges have you faced? How did you address these challenges?

How has your flexible workplace program or practice benefited *employees*?

How has your flexible workplace program or practice benefited your company?

What lessons have you learned along the way?

#### Authorization Release (Please sign and date.)

*I hereby release and hold harmless the United States Department of Labor, Women's Bureau for the use of my name, written or spoken words, photograph, picture, portrait, likeness, and voice (hereinafter collectively known as image) in order to operate, evaluate, and publicize the Flex-Options project. This includes the right to use, reproduce, publish, exhibit, distribute, and transmit my image individually or in conjunction with other images or printed matter in the production of brochures, motion pictures, television tape, sound recordings, still photography, CD-ROMs, and other media. I understand that my image may be obtained through my participation in the Women's Bureau Flex-Options Website, or at any Flex-Options events held at the local, regional, or national levels.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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