



# New Mexico State Personnel Board State Personnel Office

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## General Memorandum 2014 - 001

Date: August 15, 2014

To: Cabinet Secretaries, Agency Heads, and Agency Human Resource Managers

From: Justin Najaka, Interim Director, State Personnel Office  
Tom Church, Secretary, Department of Transportation *Justin Najaka*  
*by LOR*

Subject: Temporary Train Schedule Affecting Commuters

### 1. Purpose

This memorandum shall provide directive on New Mexico state employees' work schedules to the extent they are affected by the temporary diagnostic review and safety improvement implementation being conducted by the New Mexico Rail Runner.

### 2. Background

On August 5, 2014, the New Mexico Rail Runner began a diagnostic review and safety improvements implementation initiative affecting all Rail Runner crossings within the Santa Fe corridor. The Rio Metro Regional Transit District, Federal Railroad Administration, New Mexico Department of Transportation, New Mexico Public Regulation Commission, and the City of Santa Fe are working collaboratively on this process, which is anticipated to take 60 to 90 days.

As a result of this initiative, train delays are estimated at 7 to 10 minutes per trip, into and out of the Santa Fe area. These temporary delays will affect state employees who

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utilize the New Mexico Rail Runner for commuting purposes, and those State employees may be arriving 10 to 30 minutes late to work.

### **3. Guidelines**

In an effort to work with employees who commute on the New Mexico Rail Runner during the time period indicated above, agencies should have employees fill out and submit Alternative Work Schedule Agreements (attached as form SPO 2014-001) to their supervisor, such that employees may modify or "flex" their lunch hours for up to 30 minutes, in order to make up for the amount of time that they were late to work. If employees are more than 30 minutes late, the employees should take annual leave for that time.

On days where the train is on time and employees are able to report to work at their normally scheduled time, their regular work schedule supersedes the alternative work schedule.

If an employee is late for reasons other than a train delay, the employee is not eligible to utilize an Alternative Work Schedule Agreement, pursuant to this General Memorandum.

Once the diagnostic review of the New Mexico Rail Runner is complete, employees will be provided with notice that they need to return to their regular work schedules, and no further Alternative Work Schedule Agreements pursuant to this General Memorandum should be requested by employees or approved by supervisors.



**(AGENCY NAME)**  
**Alternative Work Schedule Agreement**  
**Rail Runner Diagnostic Review**

**EMPLOYEE INFORMATION**

<b>Employee Name:</b>	<b>Employee ID #:</b>
<b>Agency:</b>	<b>Position:</b>

**ALTERNATIVE WORK SCHEDULE**

**Employee hereby requests, and employer hereby approves the following alternative work schedule:**

<b>FIRST WEEK</b>	<b>Sunday</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Saturday</b>
<b>Start Time:</b>	-Select-	-Select-	-Select-	-Select-	-Select-	-Select-	-Select-
<b>Lunch:</b>							
<b>End Time:</b>	-Select-	-Select-	-Select-	-Select-	-Select-	-Select-	-Select-
<b>Hours Worked:</b>							

<b>SECOND WEEK</b>	<b>Sunday</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Saturday</b>
<b>Start Time:</b>	-Select-	-Select-	-Select-	-Select-	-Select-	-Select-	-Select-
<b>Lunch:</b>							
<b>End Time:</b>	-Select-	-Select-	-Select-	-Select-	-Select-	-Select-	-Select-
<b>Hours Worked:</b>							

**This agreement and schedule shall be effective (date):**

**Justification: General Memorandum 2014-001.**

I understand, and agree to adhere to the alternative work schedule guidelines established by the General Memorandum 2014-001. Management may terminate this agreement at any time. I understand the State of New Mexico Workers' Compensation Program will cover me only during the authorized scheduled hours stated above. I confirm that this alternative work schedule follows the State of New Mexico's commitment to excellence in public service, and meets the business needs of the agency. I understand that alternative work schedule eligibility is a privilege. Failure to abide by the terms and conditions of this agreement, or the Alternative Work Schedule Policy, will result in loss of the privilege.

**SIGNATURES**

_____	_____
Employee	Date
_____	_____
Supervisor	Date
_____	_____
Agency Head/Division Director	Date