**State of Michigan Hybrid Work Environment Attestation**

**Posting ID**:

**Candidate Name**:

**Vendor**:

By signing below, I acknowledge a hybrid work environment which will require onsite presence two (2) days per week, effective immediately upon start of the assignment. Additionally, I acknowledge the State reserves the right to modify the work schedule at any time throughout the duration of the assignment.

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| Candidate Signature | Date | Vendor | Date |