

Employee Name:

equipment used at the remote worksite?

## Teleworking Evaluation Worksheet

Teleworking arrangements are appropriate only when both the employee's abilities and the nature of the work performed meet the minimum criteria set out below. Additionally, positions that are **not** suited to Telework are those that:

1. Require regular face-to-face contact with a supervisor, other employees, students, or the public; or

ULID:

2. Require routine access to information or materials that are available only at the usual workplace.

## To be completed by the Supervisor prior to the Teleworking Arrangement form.

| Job Title:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Department:           |    |                   |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----|-------------------|--|
| Effective date(s) of arrangement: to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Immediate Supervisor: |    |                   |  |
| *Requests for accommodations under the Americans with Disabilities Coordinator at <a a="" be="" can="" href="https://hrc.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm.ncbi.nlm&lt;/th&gt;&lt;th&gt;Act must first&lt;/th&gt;&lt;th&gt;be review&lt;/th&gt;&lt;th&gt;ved and approved by the EEO/ADA&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Use this worksheet to assess whether a teleworking arrar If any of the answers are " no,"="" solution="" th="" worked<=""><th>-</th><th></th><th></th></a> | -                     |    |                   |  |
| Employee Criteria                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Yes                   | No | Proposed Solution |  |
| Does the employee have the ability to successfully organize, manage time, work independently and productively with minimal supervision, and have at lea a satisfactory work performance history?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | st O                  | 0  |                   |  |
| Does the employee have a thorough knowledge and understanding of their job functions and the equipmer required to Telework?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | nt O                  | 0  |                   |  |
| Does the employee have access to a remote worksite that is safe and free from interruptions?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 0                     | 0  |                   |  |
| Is the employee able to provide the security necessary to adequately protect any University information and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                       |    |                   |  |

| Position Criteria                                                                                                                                                    | Yes            | No | Solution                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----|-------------------------------|
| Can the duties of the position be performed without an employee's presence at the usual workplace on a daily or routine basis?                                       | 0              | 0  |                               |
| Does the position possess job functions that can be performed at a remote site without diminishing the quality of the work or disrupting the productivity of a unit? | 0              | 0  |                               |
| Does the position allow an employee to be as effectively supervised as if the job functions were performed at the usual workplace?                                   | 0              | 0  |                               |
| Does the position emphasize the electronic production or exchange of information using computers, modems, fax machines, or phones?                                   | 0              | 0  |                               |
| Does the position involve measurable or quantifiable work product?                                                                                                   | 0              | 0  |                               |
| Does the position have a minimal need for specialized materials or equipment available only at the usual workplace?                                                  | 0              | 0  |                               |
| JPERVISORS: If both the employee's abilities and the nature you may proceed to the Teleworking Arrange                                                               |                | •  | rformed meet the minimum crit |
| mmediate Supervisor                                                                                                                                                  | Date Completed |    |                               |