



# Human Resources Department Telework Eligibility Checklist and Agreement

## TELEWORK ELIGIBILITY CHECKLIST

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position: \_\_\_\_\_ Department: \_\_\_\_\_

***Instructions: Use this checklist to assist you in evaluating the eligibility requirements prior to entering into a telework arrangement. Refer to the Teleworking Policy for additional detail.***

Position Considerations – Are the duties of the position:

- Independent in nature, includes tasks that can be done alone
- Little need for face-to-face communication with other employees, supervisors, or the public
- Primarily office-based
- Aligned with measurable deliverables with clearly defined time frames
- Able to support the Citywide customer service needs using methods other than face to face interaction

Employee considerations – Does the employee consistently demonstrate:

- A record of high productivity and performance
- Compliance with all organizational and departmental policies and procedures
- A commitment to actively uphold the City values in their daily work and interactions
- Effective communication with supervisors, coworkers, and residents
- The ability to work with minimal supervision
- Effective time management
- The ability to achieve and maintain a high level of skill and knowledge of the job
- The ability to prioritize work and meet deadlines

Work Performance – At the time the telework agreement is considered, do the specific work demands:

- Allow for limited or infrequent in-person interaction
- Effectively support the department's mission in a telework environment
- require the use of specific technologies that are available offsite

Other Considerations – Is the teleworking employee able to ensure:

- Reliable internet connectivity and speed to support work demands and position
- Compliance with confidentiality requirements
- A safe workspace that offers minimal interruptions or distractions that affect work performance
- Is the primary telework location mutually agreed upon by the City and employee

Note – Assuming other requirements set forth are met, telework agreements outside of the DMV area must be approved by the City Manager.

Employee signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved:     Yes    No                      Notes: \_\_\_\_\_



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## TELEWORK AGREEMENT

The City supports telework arrangements where the position and employee meet eligibility criteria. This agreement is intended to ensure both the department and employee have a clear, shared understanding of the terms and conditions of the telework arrangement.

This form should be completed by the supervisor and employee together, then approved by the Department Head.

Employee Name \_\_\_\_\_

Position \_\_\_\_\_

Department \_\_\_\_\_

Direct Supervisor \_\_\_\_\_

- Type of Request
- New Request for Scheduled/Ongoing Telework
  - New Request for Project-Based Telework or Special Exemption
  - Management-initiated request (as part of position's work assignment)
  - Annual Reauthorization of Scheduled/Ongoing Telework with no modifications
  - Annual Reauthorization of Scheduled/Ongoing Telework with modifications
  - Modify existing telework agreement
  - Terminate existing telework agreement

Union affiliation  AFSCME  Local 400

FLSA-Exempt employee (  Non-exempt / overtime eligible  )

Telework arrangement  1 day per week  
 2 days per week  
 Project-based or temporary exemption (requires City Manager approval)

Telework location  home address  
 alternative home – address: \_\_\_\_\_  
 alternative office – address: \_\_\_\_\_

Telework dates Start Date \_\_\_\_\_ Review date (if applicable) \_\_\_\_\_  
End Date \_\_\_\_\_

Scheduled hours	Start time	End time
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____



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\*\* For non-union, FLSA exempt employees, the direct supervisor may notate times of expected availability to meet organizational needs during core business hours.

Describe what type of work you will be doing while teleworking and how telework will benefit the work unit and the employee (use additional sheet if necessary).

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I agree that:

- I will be available, responsive, and productive during scheduled work hours.
- I will perform duties, obligations, and responsibilities the same as employees at the central worksite, including my obligation to respond to voicemail, e-mail, and other messages in a timely manner.
- While teleworking, I will work at the above-listed location(s) during my teleworking workschedule, unless I have received prior approval to temporarily work elsewhere.
- I will observe rest and meal periods consistent with my employment status and City policy.
- Any time off or overtime must be prearranged, preapproved, and recorded according to applicable policies, department guidelines, union contract terms, etc.
- Management may periodically review, modify and/or terminate this agreement if necessary and this agreement must be reviewed for reauthorization annually.

### Productivity/Performance Expectations:

Each teleworking employee is required to maintain the same level of productivity and performance (quality, quantity, timeliness) as their non-teleworking counterparts at the central work site. List below the cadence for how work progress is communicated, and productivity/performance will be managed and assessed (e.g. structured daily or weekly check-ins, work status reports, dashboards, action plans).

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### Work Product Security and Records Retention:

You agree to ensure the protection and safeguarding of any confidential information and documents accessible within your telework site, including preventing unauthorized access to any City system or information, and disposal of work-related documents in an appropriate manner. List below any security or record retention requirements specific to your work unit.

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## Workspace, Equipment, and Supplies:

Each teleworking employee is required to maintain a telework site that is safe, functional, ergonomically suitable, and free from recognized hazards. The employee is responsible for costs associated with the setup and ongoing maintenance of the telework workspace (remodeling, furniture or lighting, repairs or modifications to the workspace). The alternative workspace should have reliable internet access, worktable/desk, chair, adequate electrical outlets, and sufficient lighting. If any additional equipment/supplies are required to fulfill responsibilities while teleworking, list them below:

Supplies and City property requested by the employee:

Item:	Provided by:	Date Issued:	Notes:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Technology Support & Requirements:

You are required to provide and maintain reliable internet connectivity and speed to support your work demands and position for the duration of the telework arrangement. In the event of equipment failure or service interruption, the employee must notify their supervisor immediately to discuss alternate assignments or other options. If immediate resolution is not available, you must return to the central workspace until resolution occurs.

Equipment or technology provided or paid for by the City will be maintained by the City at the central worksite and must be used for business purposes only. Teleworking employees are subject to the same policies as that of employees at the centrally located worksite. All City property will be returned when the telecommuting arrangement is no longer valid, if the equipment is no longer needed to do their work, if employment is terminated, or as requested unless other arrangements have been made.

Equipment or Technology provided to the employee:

Item:	Provided by:	Date Issued:	Notes:
Laptop	_____	_____	_____
Docking station	_____	_____	_____
Monitor	_____	_____	_____
Laptop power cord	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



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## Employee Acknowledgment:

- \_\_\_\_\_ I understand that this agreement may be discontinued at any time, by requesting that it be terminated myself, or by my department director terminating the agreement.
- \_\_\_\_\_ I have read and understand the Telework policy and agree to all provisions
- \_\_\_\_\_ I understand that I am required to comply with all timekeeping and overtime requirements defined by the local, state, or federal law, applicable collective bargaining agreements, and City policy. All hours worked must be entered into the timekeeping system (currently Kronos). All leave time must be requested and approved via the timekeeping system (currently Kronos).
- \_\_\_\_\_ I understand that the work I perform while teleworking remains subject to the records retention policy and applicable regulations.
- \_\_\_\_\_ I understand that work-related injuries at my telework location, while performing City functions, may be covered by the City's Workers' Compensation policy. I agree to report any work-related illness or injury immediately to my direct supervisor. I will allow the City to conduct telework site inspections if there are safety concerns or if a job-related incident or accident occurs.
- \_\_\_\_\_ I agree to maintain the confidentiality of all City information and documents, and prevent unauthorized access to any City system or information.
- \_\_\_\_\_ I agree to comply with all City policies and consistently demonstrate the City's organizational values in meeting the performance and behavioral standards of my position, including the Customer Service, Ethics, Network Usage, and Non-Discrimination, Harrassment Prevention, and Retaliation Policies.
- \_\_\_\_\_ I agree to report to the central worksite as necessary, or when requested to do so by my direct supervisor or department director.
- \_\_\_\_\_ I understand that any use of my personal vehicle during my scheduled workday may not be compensable depending on the nature of the use.

This telework agreement is not a contract of employment and does not provide any contractual rights or guarantee of continued employment.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

## Management Signatures

### Supervisor

- Approved with no modifications
- Approved with modifications
- Denied
- Terminated

If approved, please complete the following:

- The service hours that must be met are \_\_\_\_ to \_\_\_\_.
- The length of the lunch period is \_\_\_\_.
- The employee works \_\_\_\_ hours during his/her pay period.



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Approved with the following modifications:

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## Reason for Denial

- Position duties require physical presence each scheduled work day or position does not include any portable or administrative work that can be accomplished from an alternative work site
- Employee's performance has not been satisfactory within the past 12 months
- Position duties require access to specialized equipment
- Position duties require access to the handling of classified materials on each scheduled work day
- Other Reason for Denial: \_\_\_\_\_

## Reason for Termination of Telework Agreement

Employee initiated    Management Initiated    Other Reason for Termination \_\_\_\_\_

Direct Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Department Director

- Recommend Approval of request  
 Recommend Denial of request

Department Director \_\_\_\_\_ Date \_\_\_\_\_