

## Tele-Eligible Checksheet

Position No. \_\_\_\_\_ or Employee Name \_\_\_\_\_  
 Role Title \_\_\_\_\_  
 Work Title \_\_\_\_\_  
 Work Unit \_\_\_\_\_

<b>JOB CONSIDERATIONS</b>	<input checked="" type="checkbox"/> <b>COMPLETE</b>
Consider the Purpose of the Position and the nature of work to be performed as described in the EWP.  Is it primarily information or service-based?	
Do any of the Core Responsibilities included in the EWP require that the work be performed on site?  If Yes, is that a reasonable requirement and approximately how much time is devoted to those responsibilities?	
How much time does the employee spend at the primary work site?	
Does any of the work require ongoing access to equipment, materials, and files that can <i>only</i> be accessed at the work site?  If Yes, how much?	
How much time does the employee spend traveling, in meetings, or in the field?	
How much face-to-face contact with colleagues and customers is required?	
How much of the work is portable?	
Is the employee currently assigned a lap top or any other portable media?  If Yes, when and how often is it used?	
How reliant is this position on computer technology to accomplish its objectives?	
Does this position require travel?  If Yes, consider the extent to which travel is required and if the employee is equipped with mobile media during these times.	
Does the nature of the work require that the employee work and resolve routine problems independently?	

<b>EMPLOYEE CONSIDERATIONS</b>	<input checked="" type="checkbox"/> <b>COMPLETE</b>
How often is the supervisor needed to troubleshoot problems, answer questions, or provide direction? Can this direction be provided over the phone or via email?	
Does the employee have the technology, including a computer and remote-access capability that is required to work at home?  If No, is the agency prepared to provide it?	
Does the employee have a complete understanding of his/her job and performance expectations?	
Is the employee expected to work in a self-directed manner in the management of his/her time and work?	
Does the employee regularly demonstrate that his/her approach to work is organized and dependable? Does hr/she regularly meet established deadlines?	
<b>SUPERVISORY CONSIDERATIONS</b>	<input checked="" type="checkbox"/> <b>COMPLETE</b>
Are you and this employee assigned to the same physical location now?	
Would you describe yourself as a "hands-on" supervisor? If so, how much is your style influenced by the nature of the work?	
How is the employee's work normally monitored to ensure that tasks are being completed? Can this approach work at a distance or be modified for successful telecommuting?	
How do you normally intervene when the employee requests assistance or you think supervision will improve results? Does this always require face-to-face contact?	
Does anyone else monitor the employee's work activities if you are absent from the workplace for a day, a week, or longer?	
To what degree can your style of supervision/management of employees transition to an online scenario?	
<b>DECISION</b>	<input checked="" type="checkbox"/> <b>COMPLETE</b>
Position is suited for full-time telecommuting assignment.	
Position is suited for part-time or occasional telecommuting assignment.	
Position is suited for telecommuting assignments during emergencies.	
Position is not eligible for telecommuting	