

## SUPERVISOR-EMPLOYEE CHECKLIST FOR TELEWORK

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

Supervisor' Name \_\_\_\_\_

The following checklist is designed to ensure that the teleworker and supervisor are properly oriented to the policies and procedures of the Telework Program. Questions 4, 5, and 6 may not be applicable to the telework employee. If this is the case, state non-applicable or N.A.

|  |             |           |
|--|-------------|-----------|
|  | <b>DATE</b> |           |
| Employee/Supervisor has read DLAD 1XXX.XX and DLAI 1XXX.XX.  |             |           |
| Employee has been provided with a schedule of work hours.  |             |           |
| Employee has been issued/has not been issued government furnished equipment. (If no equipment has been issued please mark N.A. on the date line.)                        |             |           |
| Equipment issued by DLA is documented and properly received.   |             |           |
| Check as applicable:   | <b>YES</b>  | <b>NO</b> |
| Computer   |             |           |
| Modem  |             |           |
| Fax machine  |             |           |
| Telephone  |             |           |
| Other  |             |           |
|  | <b>DATE</b> |           |
| Policies and procedures for care of equipment issued by the Agency have been explained and are clearly understood.   |             |           |
| Policies and procedures covering classified, secure, or Privacy Act data have been discussed and are clearly understood.   |             |           |
| Requirements for an adequate and safe office space and/or area have been discussed, and the employee certifies those requirements are met.                               |             |           |
| Employee understands that the supervisor may terminate employee participation, in accordance with established administrative procedures and union-negotiated agreements. |             |           |
| Employee has participated in training.   |             |           |
| Supervisor has participated in training.   |             |           |
| Telework Agreement has been completed and signed.  |             |           |
| Employee's signature:  |             |           |
| Supervisor's signature:  |             |           |