**Flexible Work and/or Telework Schedule Request Evaluation Form**

Date Completed:       Employee Name:

Supervisor Name:       Employee Name:

Department/Unit/CSD:       Employee ID:

Work Arrangement Requested:       Position Title:

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**Request Evaluation**

There are multiple factors to consider when exploring the possibility of flexible work arrangements including (1) business need, (2) position suitability, (3) employee suitability, (4) supervisory approach, and (5) team effectiveness. Please use the template below to explore the impact of the proposed work arrangement on each of these factors. The change in work location or hours should not have a net adverse effect on business results, employee performance, or the work environment.

1. Business Need

|  |  |
| --- | --- |
| Is the proposed work arrangement in the best interest of the university? | Yes No |
| Does proposed work arrangement enhance or maintain operational efficiencies? | Yes No |
| Does proposed work arrangement enhance the productivity of the department? | Yes No |

Comments:

1. Position Suitability

|  |  |
| --- | --- |
| Can the role be performed without frequent face-to-face contact with students, supervisors, other employees, or the public? | Yes No |
| Can the role be performed without ongoing access to equipment, materials, and files that can only be accessed on campus or during normal business hours? | Yes No |
| Are the responsibilities and expectations of the role clearly defined? | Yes No |
| Can the employees performance be measured and evaluated in the proposed work arrangement? | Yes No |

Comments:

1. Employee Suitability

|  |  |
| --- | --- |
| Does the employee’s performance history (including performance reviews, disciplinary actions, etc.) indicate that the employee is well-suited for the proposed work arrangement? | Yes No |
| Does the employee possess the necessary computer skills to complete required job functions outside of the office or outside regular business hours? | Yes No |
| Does the employee complete required tasks and resolve issues independently? | Yes No |
| Does the employee consistently meet deadlines? | Yes No |
| Is the proposed work arrangement likely to enhance employee productivity by helping the employee balance work expectations and external factors and demands (ie. traffic, childcare, etc.) | Yes No |

Comments:

1. Supervisory Approach

|  |  |
| --- | --- |
| Will you be able to communicate effectively with the employee under the proposed arrangement? | Yes No |
| Will you be able to monitor the employee’s progress and performance under the proposed arrangement? | Yes No |
| Are you able to coordinate and manage multiple schedules for employees? | Yes No |
| Do you possess the necessary computer skills to supervise employees working outside of the office or outside regular business hours? | Yes No |

Comments:

1. Team Effectiveness

|  |  |
| --- | --- |
| Do all team members have the equipment and skills to communicate effectively under the proposed work arrangement? | Yes No |
| Can the team foster belonging, maintain cohesiveness, and sustain engagement under the proposed work arrangement? | Yes No |
| Would team members support and embrace a work environment with a combination of different work arrangements? | Yes No |
| Will the team work together to coordinate and create a cohesive overall flexible or hybrid team work schedule and be flexible when needed in order to ensure adequate office coverage? | Yes No |

Comments:

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**Summary**

|  |  |
| --- | --- |
| Based on the collective responses to the assessment questions, do you recommend this position be considered for a flexible work arrangement? If no, please indicate the primary factor in your evaluation below. | Yes No |
| Business Need  Position Suitability  Employee Suitability  Supervisory Approach  Team Effectiveness | |

Comments: