TELECOMMUTER'S WORK PLAN

Telecommuter _____ Supervisor _____

1. **I agree to work at the following remote work location: (Please specify designated work area within the remote location.)**

   _____

2. **My telecommuting work hours will be _____ a.m. to _____ p.m.**

3. I will be unavailable from _____ to _____.

4 I agree to call the office to obtain messages at least every _____hrs. during the day while working at the remote work location.

5 The following equipment will be checked out for use in my home office:

   _____

6 The following tasks and objectives are to be worked on at my home office:

   _____

   Amount of time spent on task: _____ Completed: Yes No

   _____

   Amount of time spent on task: _____ Completed: Yes No

   _____

   Amount of time spent on task: _____ Completed: Yes No

   _____

   Amount of time spent on task: _____ Completed: Yes No

Unplanned Activities:

_____

Amount of time spent on task: _____ Completed: Yes No

_____

Amount of time spent on task: _____ Completed: Yes No

_____

Amount of time spent on task: _____ Completed: Yes No

_____

Amount of time spent on task: _____ Completed: Yes No

The employee and the supervisor have agreed upon this agenda for the telecommuting day of _____199___.

Date: _____ Employee's signature: _____

Supervisors' signature: _____

SUPERVISOR AGENDA REVIEW

The goals and objectives agreed upon for the telecommuting day stated above were met by the employee as noted. The work listed was reviewed and supervisor concurs with accomplishment of assigned tasks (any exceptions noted).

Date: _____

Employee's signature: _____