## U.S. FISH AND WILDLIFE SERVICE TELEWORK AGREEMENT BETWEEN SUPERVISOR AND EMPLOYEE

Name of Employee:	Employee's Position Title, Pay Plan, Series, and Grade:			
Employee's Organization (Name, Address, Phone, Email):	Telework Agreement Period:			
Official Duty Station:	Alternative Worksite:			
Name of Supervisor	Telephone and Email of Supervisor:			
Type of Telework (Please select all that are appropriate)  CORE – Work performed at an alternative wo SITUATIONAL – Work performed at an alternative COOP – Continuity of Operations Plan	orksite on a routine, regular, and ongoing basis. rnative worksite on an irregular basis.			

Tour of Duty – Week One					
	Official Duty Station Alternative Worksite				
	Start Time Stop Time Start Time Stop Time		Total Hours		
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
				Total Hours:	

Tour of Duty – Week Two					
	Official Duty Station Alternative Worksite				
	Start Time Stop Time Start Time Stop Time		Total Hours		
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
				Total Hours:	

## The Service's Telework Program:

- Teleworking is a management option and not an employee entitlement. Supervisors may approve or deny your request to telework, and they may suspend or terminate your participation in the program.
- Supervisors determine if a position is appropriate for teleworking and if you are well-suited for working independently away from your official duty station.
- Your participation in the telework program is voluntary. We may not require you to telework except in emergencies.
- If you belong to a labor union, you can only participate in teleworking after we fulfill appropriate labor relations obligations.
- You must complete and sign a Telework Agreement. You and your supervisor should each keep a copy of the agreement for reference.
- Your supervisor will certify your time and attendance just as he/she would if you were working every day at the official duty station.
- You may not care for children or other dependents or perform household chores or other personal activities while teleworking. Working at home is not a substitute for child care, elder care, or personal leave.
- Working off site must not adversely affect the Service's mission and functions. If, at any time, your
  participation in the telework program is having an adverse impact on work operations, your supervisor may
  either terminate or modify your agreement immediately (subject to any labor relations obligations we may
  have).
- If you do not meet the requirements in this Telework Agreement, your supervisor may suspend or terminate your privileges and, depending on the severity of the infringement, may also propose disciplinary action.

## **TERMS and CONDITIONS:**

- Your salary and benefits will remain the same as for your official duty station as long as you work at the official duty station at least one day per week. Otherwise, your pay may be subject to change based on locality.
- You agree not to conduct personal business while in official duty status at your alternative worksite.
- You must follow established office procedures to ask for and obtain leave. You may work overtime only when your supervisor schedules and approves it in advance.
- You must protect any Government-owned equipment and use it only for official purposes. We agree to service and maintain any Government-owned equipment we issue to you. You agree to report malfunctions in Government-owned equipment to your supervisor in a timely manner and bring any malfunctioning equipment to the office for maintenance and repairs. If you use your own equipment for telework, you have to install, service, and maintain it.
- You must not remove classified, proprietary, or sensitive material (hard copy or electronic) from your official duty station. You must safeguard all files, records, and reference material you use or create when teleworking and incorporate them into the official office files, as appropriate. You must adhere to the provisions of records management policy, the Privacy Act, Freedom of Information Act, and Federal Records Act. You must not remove any original Federal records from the official duty station.
- You must comply with our security procedures and ensure you protect all Service-provided equipment from being damaged, stolen, or accessed by others. You agree to accept responsibility for damaged or stolen equipment.
- The Service is not liable for damages to your personal or real property while you telework, except to the extent we are held liable by the Federal Tort Claims Act or the Military Personnel and Civilian Employees Claims Act.

- You must follow the policies concerning personal use of office equipment and library collections while teleworking.
- If your alternative worksite is your house (and not a telework center), you must designate one area as the official work area. Our potential exposure to liability is restricted to this official work area. Your home office is a space set aside for your work, and family responsibilities must not interfere with work time. You must complete a safety checklist to make you aware of safety requirements and to help eliminate potential hazards.
- You agree to allow Service representatives to access your alternative worksite during your normal working hours.
- Unless you make an agreement to the contrary, the Service is not responsible for any operating costs that are associated with you using your home as an alternative worksite such as home maintenance, insurance, or utilities. You may be reimbursed for authorized expenses you incur while teleworking.
- You are bound by all conflict of interest statutes and regulations while teleworking.
- You are covered by the Federal Employees' Compensation Act (FECA) for injuries and work-related illnesses sustained while teleworking. You must notify your supervisor immediately of unsafe and/or unhealthful conditions and practices at your alternative worksite and personal conditions (physical or mental) that adversely affect your ability to perform work in a safe and healthful manner. You must report to your supervisor immediately any job-related incident that results in or has the potential to cause injury, illness, or property damage and complete any required forms. Your supervisor must investigate the incident immediately and complete and submit a safety report to the appropriate safety office.
- You must complete all assigned work according to procedures you agree to with your supervisor and according
  to guidelines and standards in your performance plan. You must provide regular reports, if required, to your
  supervisor so he/she can evaluate your performance. If your performance suffers when you telework, your
  supervisor may cancel your arrangement.
- Nothing in this Telework Agreement keeps the Service from taking appropriate disciplinary or adverse action
  against you for conduct issues associated with teleworking, including failure to comply with the Telework
  Agreement.

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Rτ	C101	nıno	helow	von and	your supervisor	agree to me	et all terms	and	conditions	in this	agreement

Employee's Signature and Date:	
Supervisor's Signature and Date:	

Your supervisor must send a copy of the completed and signed Telework Agreement to the Telework Coordinator, servicing human resources office, before you can start teleworking. You should both keep a copy of the agreement for reference.

**COMMENTS** (Use this section to describe the equipment the employee will be issued and what equipment the employee is supplying, and any additional information describing the teleworking arrangement. Use additional paper if needed.):

## U.S. FISH AND WILDLIFE SERVICE WORK AT HOME TELEWORK SAFETY CHECKLIST

Name of Employee:	Name of Supervisor:					
This checklist should help you to understand the requi overall safety of your alternative worksite. You must o sign and date the checklist and include it in your Telev should keep a copy of the Telework Agreement for your proposition of any significant changes to the work area.	complete this safety checklist. A work Agreement. Both you and ur records. You are responsible	After you your su	comple pervisor	te it,		
supervisor of any significant changes to the work area		Check	Ves No	or		
LIST OF ITEMS/CONDITIONS T	O INSPECT		Check Yes, No, or N/A (Not Applicable)			
		YES	NO	N/A		
1. Is the workspace free of asbestos-containing materia	als?					
2. If asbestos-containing material is present, is it unda						
3. To the extent it can be determined, is the work area problems?	free of indoor air quality					
4. Is the space free of noise hazards?						
5. Are temperature, noise, ventilation, and lighting add of job performance?	equate for your normal level					
6. Is all electrical equipment free of recognized hazard	s that would cause physical					
harm (e.g., frayed, loose, or exposed wires)?	1 3					
7. Are all circuit breakers and/or fuses in the electrical	panel labeled as to intended					
service?						
8. Do circuit breakers clearly indicate if they are in the	*					
9. Will the building's electrical system permit the grou	nding of electrical equipment			ļ		
(a 3-prong receptacle)?						
10. Is there a potable (drinkable) water supply?						
11. Are all stairs with four or more steps equipped wit						
12. Are aisles, doorways, and corners free of obstructi movement?	ons to permit visibility and					
13. Are file cabinets and closets arranged so drawers a	nd doors do not open into					
hallways?						
14. Are the phone lines, electrical cords, and surge pro	tectors secured under a desk					
or alongside a baseboard?				<u> </u>		
15. Is there a smoke detector in or near the work area?			<u> </u>	<u> </u>		
16. Is adequate ventilation present for the desired occu			<u> </u>	ļ		
17. Are lavatories available with hot and cold running	water?					
18. Do chairs have any loose casters or wheels?						
19. Are the rungs and legs of chairs sturdy?						
20. Is the office space neat, clean, and free of excessive						
21. Are the floor surfaces clean, dry, level, and free of	<u> </u>					
22. Are carpets well secured to the floor and free of fra	-					
23. Do you have an emergency or contingency plan in	place with emergency		_			
telephone numbers and means of escape?						
24. Is your chair adjustable?				1		

25. Do you know how to adjust your chair?		
26. Is your back adequately supported by a backrest?		
27. Are your feet on the floor or fully supported by a footrest?		
28. Are you satisfied with the placement of your computer monitor, mouse and		
keyboard?		
29. Is it easy to read the text on your screen?		
30. Do you have a document holder?		
31. Do you have enough leg room at your desk?		
32. Is the computer monitor screen free from noticeable glare?		
33. Is the top of the computer monitor screen at eye level?		
34. Is there space to rest your arms while not keying?		
35. When keying, are your forearms parallel with the floor?		
36. Are your wrists fairly straight when keying?		

I believe the Safety Checklist is accurate to the best of my knowledge.
Employee's Signature and Date:
COMMENTS: