Division of Services for People with Disabilities
Home Office Feasibility Worksheet

The employee and employee’s supervisor must complete this Home Office Feasibility Worksheet to determine the appropriateness of approving an employee for a Home Office Agreement with the Division of Services for People with Disabilities (Division). The employee and supervisor must fill out all applicable fields, sign, and forward the completed worksheet to the Division Director for discussion and approval.

1. Identify and describe in detail the legitimate administrative reason justifying a home office agreement with the Division.

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2. Identify and describe in detail how approval of a home office represents a measurable benefit to the Division. Indicate why a telecommute agreement does not accomplish that same measureable benefit.

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3. List your current job title and a description of your job duties. Describe any limitations that a home office may have on your ability to effectively accomplish your duties.

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4. Describe how you expect to continue to meet the needs of internal and external customers as well as other Division, Department or Interagency staff while working from a home office.

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5. Describe how you expect employee productivity to be defined and measured?

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6. Describe the proposed home office location. (Size, location, furniture, characteristics, separation from living area, etc.)

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7. Describe what precautions you are able to take in order to ensure the confidentiality of client information.

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8. If you have adult or child care responsibilities, describe what arrangements you will have in place to assure that you are not spending work time caring for an adult or child in the home.

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9. Describe the equipment, if any, needed at the home office location to support your home office arrangement. (Personal computer, terminal, telephone line, modem, etc.)

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10. Describe what computer applications you use now, or would require, at your home office location. (Word processing, electronic mail, spreadsheets, mainframe applications, etc.)

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11. Describe in detail any expenses as a result of this home office arrangement that you would like the Division to consider for reimbursement. If internet or a telephone landline are among these expenses, you must indicate whether the service will be also used for personal use, attach or list out information from the required three (3) bids, and identify the cost of internet or telephone landline separately from any bundled package. You must indicate why you believe the options you have selected to be the most cost-effective solution for the Division.

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12. What other special accommodations, not already noted, would you require for this home office agreement?

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Employee Signature          Date

Supervisor Signature          Date
Year 2 Extension:

Employee Signature        Date

Supervisor Signature       Date

Note: Do not sign this extension if the information contained in this feasibility worksheet is in any way outdated or in need of updating. You must submit a new feasibility worksheet with the most current information.

Year 3 Extension:

Employee Signature        Date

Supervisor Signature       Date

Note: Do not sign this extension if the information contained in this feasibility worksheet is in any way outdated or in need of updating. You must submit a new feasibility worksheet with the most current information.

At the end of this year, to continue the current home office arrangement, the employee and employee’s supervisor must submit a new Home Office Feasibility Worksheet and sign a new Home Office Agreement.