



Telework Agreement and Performance Order

Instructions for requesting telework

1. *Read the order all the way through. Complete this page and sign at the end.*
2. *Email the order to Integrated Statistics at least five days in advance. We will ask your federal POC for feedback on whether the tasks are suitable. For situational telework, such as a snowstorm or building closure, send us the form as soon as you can, based on your knowledge of weather, travel conditions, etc., and common sense.*
3. *Do your telework.*
4. *Record the telework hours on your timesheet and put the dates in the Notes field.*
5. *The morning that you get back to the office, email us a brief summary of what you did, and if possible a way to verify it.*

Section I (Completed by Integrated Statistics Employee)

Employee Name: _____

Dates

Start Date _____

Duration Estimate _____ (e.g. 1-2 days)

End Date _____

Section II — Telework Agreement

The following constitutes an agreement on the terms and conditions of the telework arrangement for working at an authorized alternative workplace between the Employee and Integrated Statistics.

(A copy of the agreement will be sent to the COR and retained by Laura Shulman and employee).

Voluntary Participation

The employee voluntarily agrees to work at the approved alternative workplace indicated in Section 1 of the Telework Application and Agreement. The employee and supervisor agree to follow all applicable policies and procedures established by the company. The employee recognizes that the telework arrangement is an additional method to accomplish work that must go through several layers of approval. The first step is filling out this form.

Follow Up

The employee is required to follow-up the day of telework with a summary of work accomplished, and/or with submission of deliverable as applicable. The summary shall be provided to the Federal Point of Contact and the COR upon return to the primary place of performance. In addition, the summary will be provided to the Integrated Statistics office so that Integrated Statistics can use the summary to support time sheets. If you do not send your summary to the IS office, then we cannot send it with the invoice and we will not get paid. If IS is not paid, then you will not be paid. *When teleworking, please make a note of the date and times in the Notes section of the online time sheets.*

Official Duty Station and Alternative Workplace

All pay, leave, and travel entitlement are based on the official duty station as shown in Section I of the Telework Application and Agreement.



Alternative Workplace Costs

The employee understands that the Integrated Statistics will not be responsible for any operating costs that are associated with the use of the employee's home as an alternative workplace, for example, home maintenance, insurance or utilities.

Reimbursements

The employee does not relinquish any entitlement to reimbursement for authorized expenses incurred while conducting business for the Government, as provided for by statute and regulations.

Equipment/Supplies

The employee agrees to protect any Government-furnished equipment and/or supplies and to use the equipment only for official purposes. The employee is responsible for maintaining, installing, and the servicing of any personal equipment needed. Note that government issued equipment is not available during government furlough/shutdown)

Salary and Benefits

A telework arrangement is not a basis for changing the employee's salary, benefits, or entitlements.

Overtime

The employee agrees to work overtime only when ordered and approved in writing by the government point of contact and in advance of working the overtime. The employee understands that overtime work without such approval may not be compensated and may result in termination of the telework arrangement.

Leave

The employee agrees to follow established office procedures for requesting and obtaining approval of leave. The employee understands that if an emergency condition occurs either affecting the alternative workplace or the Federal government, the employee must contact the Integrated Statistics office and follow appropriate dismissal or leave requesting procedures.

Time and Attendance Reports

The employee is responsible for ensuring the accuracy of time and attendance reported for the employee's work at the official duty station and the alternative workplace.

Conducting Personal Business

The employee agrees not to conduct personal business at the alternative workplace while in an official duty status.

Liability

The employee understands that Integrated Statistics is not liable for damages to an employee's personal or real property while the employee is working at the approved alternative workplace.

Safety and Worker's Compensation

The employee understands that (s)he is covered by worker's compensation if injured in the course of performing official duties at authorized work locations. The employee agrees to notify the Integrated Statistics office immediately of any accident or injury that occurs and to complete any required forms.

Standards of Conduct

The employee agrees to abide by the same Ethical Conduct Standards while on telework as when working on site in official duty.



Disclosure

The employee agrees to protect any records from unauthorized disclosure or damage and will comply with requirements of the Privacy Act of 1974, 5 U.S.C. 552a, and all other regulatory guidance controlling the protection and use of government records.

Termination

Either party may terminate the Telework agreement with reasonable advance notice, generally two (2) administrative work weeks, but not less than seven (7) calendar days and require the employee to resume working at his/her official duty station.

Compliance with this Agreement

The employee's failure to comply with the terms of this agreement may result in the termination of this agreement and the telework arrangement. Failure to comply with the provisions of this agreement may also result in appropriate disciplinary or adverse action against the employee.

Certification

By signing this agreement, the employee certifies that (s)he has read the terms of this agreement and agrees to follow the policies and procedures outlined in them as well as all other applicable regulations, policies, and procedures.

Employee Signature: _____ **Date:** _____

Work Email: _____

For your first telework request, fill in the whole page. Otherwise, fill in only things that have changed.

Job Title: _____

Group/Agency COR: _____

Group/Agency POC: _____

Usual Work Location: _____

Location of Telework: (address) _____

Phone: _____

Pick one:

___ **Situational Telework (snow, building closure, etc.)**

___ **Regularly Scheduled Telework (very few on this status)**

___ **Government Furlough/Shutdown**

Description of work you plan to perform while teleworking – please be specific

Any Government Issued Equipment Needed

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