

Remote Work Suitability Assessment

Date Completed	
Supervisor Name	
Employee Name	
Department/Unit	
Position Title	

Section 1: Business Need

1	Does this remote work arrangement serve the best interests of the university?	
2	Would a remote work arrangement enhance, maintain, or diminish operational efficiencies?	
3	Does the addition of remote work arrangement(s) enhance the productivity of the department and the employees?	

1	Does the position require ongoing access to equipment, materials, and files that can only be accessed on campus?	
2		

Based on the collective responses to the assessment questions, do you recommend this position be considered for a remote work arrangement? If no, please indicate the primary business reason/suitability factor below.	
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Business Need	Position Suitability	Employee Suitability	Supervisory Approach	Team Effectiveness
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Notes:
