

**King County Metro
Teleworker Selection Assessment Form for Supervisors**

Telework is a workplace strategy that can involve working from home or another location on a full- or part-time basis. Teleworking can be a productive scheduling practice for many employees, although it will not be feasible for all employees. Teleworking arrangements are successful when an employee's work responsibilities and personal work style is well matched with working away from the office.

This assessment form provides an opportunity to consider whether teleworking will be an effective tool for meeting organizational and personal objectives. Responses to this questionnaire will help you as a supervisor/manager to assess if teleworking can work for you and your employee.

This assessment form (optional) **can** be completed for each employee interested in participating in the telework program.

Telework Screening Survey for Supervisors

Name: _____

Employee name: _____

1. Please describe your employee's job tasks. For example research, data entry and processing, reports, customer service, writing, administrative, reading, computer programming, field visits and other.

2. Which of these tasks can they do from home?

3. Which of these tasks can't they do from home?

4. Employee Characteristics

On a scale of one to five please rate the following according to your employee's characteristics.

Need for supervision, frequent feedback				
(No need)		(Neutral)		(High need)
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Importance of co-workers' input to work function				
(Not important)		(Neutral)		(Very important)
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Discipline regarding work				
(No discipline)		(Neutral)		(High discipline)
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Desire/need to be around other employees				
(No need)		(Neutral)		(High need)
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Level of job knowledge				
(None)		(Neutral)		(High)
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Quality of work				
(Low quality)		(Neutral)		(High quality)
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

Supervisor 's Attitude *On a scale of one to five please rate the following :*

Trust employee's ability to telework effectively

(Low) 1 2 (Neutral) 3 4 (High) 5

Your ability to establish clear objectives

(Low) 1 2 (Neutral) 3 4 (High) 5

Your ability to communicate with employees

(Low) 1 2 (Neutral) 3 4 (High) 5

5. Considering the nature of your employee's jobs, how much would you want him/her to telework? *(Choose one only)*

- | | |
|---|---|
| <input type="checkbox"/> About once every two weeks | <input type="checkbox"/> Three days a week |
| <input type="checkbox"/> About once a week | <input type="checkbox"/> Occasionally for a special project |
| <input type="checkbox"/> Two days a week | <input type="checkbox"/> Other |

Compare your results with the employee's assessment, discuss with your employee, and inform the employee if they are approved for teleworking.