

EMPLOYER NAME
Teleworker Selection Survey for Employees

Telework is the concept of working from home on a full or part-time basis. Teleworking can be a productive scheduling practice for many employees although it may not be feasible for employees whose job duties and home environment may not be conducive to working away from the office. Teleworking arrangements are successful when an employee's work responsibilities and personal work style is well matched with working away from the office.

This questionnaire 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 and your supervisor to assess if teleworking can work for EMPLOYER and you.

This questionnaire must be completed by each person interested in participating in the teleworking program.

Teleworking Screening Survey for Employees

Name: _____ Supervisor: _____
Classification _____ Department: _____
: _____

1. Please describe your current job tasks.

2. The following four groups of characteristics relate respectively to your existing work, to your future work as it can be adapted to teleworking, to you as an employee, and to your manager. Please rate each characteristic as high (H), medium (M), or low (L) by placing the appropriate letter in each blank.

Existing Work Characteristics

Please rate the following according to your existing job requirements and characteristics.

- _____ Amount of face-to-face contact required
- _____ Degree of telephone communications required
- _____ Autonomy of operation
- _____ Ability to control and schedule work flow
- _____ Amount of in-office reference material required

Future Work as a Teleworker

Please rate the following job characteristics in terms of their adaptability to teleworking.

- _____ Amount of face-to-face contact required
- _____ Degree of telephone communications required
- _____ Autonomy of operation
- _____ Ability to control and schedule work flow
- _____ Amount of in-office reference material required

Employee Characteristics

Please rate the following according to your own characteristics as an employee, and as a teleworker.

- _____ Need for supervision, frequent feedback
- _____ Importance of co-workers' input to work function
- _____ Disciplined regarding work
- _____ Desire/need to be around people
- _____ Potential friction at home if teleworking (e.g. interruptions due to caring for sick child or spouse)
- _____ Level of job knowledge
- _____ Quality of work

3. Considering the nature of your job, how much would you want to telework? (Choose one)

To make your selection, put the cursor over the box you want to mark, right click the mouse, and select "Properties." Under "Default value" in the dialog box mark "Checked."

- | | |
|---|---|
| <input type="checkbox"/> (a) About once every 2 weeks | <input type="checkbox"/> (d) Three days a week |
| <input type="checkbox"/> (b) About once a week | <input type="checkbox"/> (e) Occasionally for a special project |
| <input type="checkbox"/> (c) Two days a week | <input type="checkbox"/> (f) _____ |
| | Other: _____ |

4. What kinds of work would you expect to do while teleworking? (Choose as many as apply)

To make your selection, put the cursor over the box you want to mark, right click the mouse, and select "Properties." Under "Default value" in the dialog box mark "Checked."

- | | |
|--|--|
| <input type="checkbox"/> (a) Writing/typing | <input type="checkbox"/> (f) Research |
| <input type="checkbox"/> (b) Word processing | <input type="checkbox"/> (g) Talking on the phone |
| <input type="checkbox"/> (c) Data management/ computer programming | <input type="checkbox"/> (h) Sending/receiving electronic mail |
| <input type="checkbox"/> (d) Administrative | <input type="checkbox"/> (i) Field visits |
| <input type="checkbox"/> (e) Reading | <input type="checkbox"/> (j) Thinking/planning |
| <input type="checkbox"/> (k) Other (please specify): _____ | |

5. Given the amount of teleworking you want to do, and the kinds of work you would do while teleworking, what equipment/services would you need, and which of those do you currently have? (Check appropriate box)

- | | Need | Have |
|-------------------|--------------------------|--------------------------|
| Computer/terminal | <input type="checkbox"/> | <input type="checkbox"/> |
| Printer | <input type="checkbox"/> | <input type="checkbox"/> |

Modem	<input type="checkbox"/>	<input type="checkbox"/>
Desk, filing space, other furniture	<input type="checkbox"/>	<input type="checkbox"/>
More than one phone line	<input type="checkbox"/>	<input type="checkbox"/>
Fax machine	<input type="checkbox"/>	<input type="checkbox"/>
Voice mail	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

6. Do you have adequate space in your home to dedicate to working?

(a) Yes (b) No

7. Are there any distractions/obligations that will make working at home difficult or impossible?

(a) Yes (b) No