

REMOTE WORK REQUEST AND APPROVAL		Prescribed by: DLAI 1035.01 Sponsor: Human Resources (J1)
<b>AUTHORITY:</b> 5 U.S.C. Ch. 65, Telework; DoD Instruction 1035.01, Telework and Remote Work, DLA Instruction 1035.01, DLA Telework and Remote Work.		
<b>PURPOSE(S):</b> Information is used by supervisors, program coordinators, DLA Information Operations and DLA Human Resources Services, Human Resources Information Systems for managing, evaluating, and reporting DLA Alternate Worksite/Remote Work Record activity/participation. Information on participation in the Remote Work Program, minus personal identifiers, is provided in management reports and to the DoD for a consolidated response to the Office of Personnel Management (OPM) annual data call. Portions of the records are also used to validate and reimburse participants for costs associated with telephone and Internet usage.		
<b>ROUTINE USES:</b> In addition to disclosures generally permitted under 5 U.S.C. 552(a)(b) of the Privacy Act of 1974 we anticipate disclosure outside of DoD as follows: To the Department of Labor when an employee is injured while remote working, details of the remote work arrangement may be disclosed. To appropriate Federal official to provide pertinent workforce information for use in national or homeland security emergency/disaster response. Additional routine uses, though not anticipated to routinely be made, are listed in the applicable System of Records Notices (SORN): OPM/ GOVT-1, General Personnel Records and S375.80, Defense Logistics Agency (DLA) Alternate Worksite/Remote Work Records both of which can be found at <a href="https://www.fpc.gov/resources/SORNs/">https://www.fpc.gov/resources/SORNs/</a> .		
<b>DISCLOSURES:</b> Voluntary; however, failure to provide the information may result in the inability to participate in the DLA Remote Work Program.		
<b>EMPLOYEE / POSITION INFORMATION</b>		
1. EMPLOYEE		2. ORGANIZATION
		3. JOB TITLE
4. GRADE AND JOB SERIES		5. PHONE NUMBER
		6. LAST PERFORMANCE RATING
<b>7. REQUEST TYPE</b> <input type="checkbox"/> Employee Initiated <input type="checkbox"/> Management Initiated		<b>9. CRITERIA TYPE - (SELECT RECRUITMENT, RETENTION OR OTHER)</b> <input type="checkbox"/> Recruitment <input type="checkbox"/> Critical/Hard to Fill Position <input type="checkbox"/> Mission Critical Designated Position <input type="checkbox"/> Retention <input type="checkbox"/> Mission Critical Designated Position <input type="checkbox"/> Employee Hardship <input type="checkbox"/> Employee Pending Retirement <input type="checkbox"/> Critical/Hard to Fill Position <input type="checkbox"/> Other:
<b>8. DURATION</b> <input type="checkbox"/> NTE 1 Year <input type="checkbox"/> Indefinite		
10. REMOTE WORK JUSTIFICATION		
11. WORK ASSIGNMENTS AND MODES OF COMMUNICATION		
12. EQUIPMENT AND SOFTWARE REQUIRED		
13. REQUEST DATE		14. END DATE



## REMOTE WORK AGREEMENT

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1. EMPLOYEE

2. JOB TITLE

3. GRADE AND JOB SERIES

4. SUPERVISOR

### WORK AGREEMENT

1. Employee requests to participate in the Remote Work Program to adhere to applicable policies, guidelines, and procedures. Agency concurs with employee participation and agrees to adhere to applicable policies, guidelines, and procedures. This agreement will be reviewed annually to ensure the remote work arrangement is compliant with applicable policies, guidelines, and procedures.
2. Participation in the program will commencing and .
3. Employee's official tour of duty will be from: to including a one-half hour non-paid lunch period.

### 16. SCHEDULE TYPE

- ☐ Fixed schedule in accordance with local guidance and/or collective bargaining agreement.
- ☐ Flexitime in accordance with organization guidance and/or collective bargaining agreement.
- ☐ AWS in accordance with local guidance and/or collective bargaining agreement.

17. REMOTE WORK ADDRESS

18. AGENCY WORKSITE ADDRESS

- Participating employees and applicable management officials will follow Agency prescribed criteria and procedures for remote work.
- The DLA Remote Work program is not an entitlement and not all employees will be eligible for participation.
- All pay entitlements (including locality-based pay), and other government benefits are based on the official remote worksite identified in this agreement and documented on their Standard Form (SF) 50. Any changes to the remote worksite must be approved in advance and will require a new remote work agreement. Failure to submit a new remote work agreement may impact a remote worker's program participation.
- All costs associated with a move to the new official worksite are the responsibility of the employee. The remote worker is entitled to travel reimbursement if required to travel to the agency worksite, IAW the JTR.
- Employee's timekeeper will have a copy of the employee's remote work schedule and will record the time and attendance as if performing official duties at the official duty station.
- Employee will work their approved tour of duty and any hours, including overtime, compensatory time, religious time, or credit hours, outside their standard schedule will be approved in advance and compensated in accordance with applicable law, regulations, or other pay guidance.
- The employee will follow established office procedures and/or collective bargaining agreement for requesting and obtaining approval of leave.
- Remote work is not a substitute for dependent care.
- Remote employees are expected to work during any regional Federal office closures, delayed arrivals, and early dismissals. Remote employees must notify their supervisor immediately when emergencies occur that affect a remote worksite to request leave, excused absence, worksite relocation, etc.
- If employee uses Government equipment, employee will use and protect the equipment in accordance with Agency policy and procedures. Government-owned equipment will be serviced and maintained by the government. If an employee provides his/her own equipment he/she is responsible for purchasing and installing any software, servicing it, and maintaining it. Use of personally owned computer equipment to connect to the DLA network is approved if appropriate security software is installed and security procedures are followed to avoid risk of intrusion or impact to the DLA environment.

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- DLA retains the right to inspect the home work site, by appointment only, to ensure proper maintenance of Government-owned property and safety standards provided management has reasonable cause to believe that a hazardous work environment exists.
- DLA will not be liable for damages to an employee's personal or real property during the course of performance of official duties or while using DLA equipment in the employee's residence, except to the extent DLA is held liable by the Federal Tort Claims Act or claims arising under the Military Personnel and Civilian Employees Claims Act.
- DLA will not be responsible for operating maintenance, or any other costs (e.g., utilities) whatsoever associated with the use of the employee's residence. The employee does not relinquish any entitlement to reimbursement for authorized expenses incurred while conducting business for the government, as provided by statute, and implementing regulations.
- Employee is covered under the Federal Employee's Compensation Act if injured in the course of performing official duties at the official alternate work site. Any accident or injury occurring at the alternate duty station must be brought to the immediate attention of the supervisor. Because an employment-related accident sustained by a remote work employee will occur outside of the premises of the remote worksite address, the supervisor must investigate all reports as soon as practical following notification.
- The employee is required to designate one area in the home as the official work or office area that is suitable for the performance of official government business. The government's potential exposure to liability is restricted to this official work or office area for purposes of remote work.
- Employees will apply approved safeguards to protect Government/DLA records from unauthorized disclosure or damage and will comply with Privacy Act requirements set forth in the Privacy Act of 1974, PL 93-679, codified at Section 552a, Title 5 USC.
- Employees shall manage all files, records, papers, or machine-readable material and other documentary materials, regardless of physical form or characteristics, made or received during remote work in accordance with DLAI 5015.1, DLA Records Management Procedures and Records Schedule.
- No classified documents (hard copy or electronic) may be taken to, or created at, an employee's alternative work site. CUI and sensitive non-classified data may be taken to alternative work sites if necessary. precautions are taken to protect the data, consistent with DoD regulations.
- The employee continues to be covered under the DLA standards of conduct while working at the remote worksite address.
- Remote work may be terminated by management. If remote work is terminated for reasons other than the employee's performance or conduct, the affected employee will be directed to report to the new duty station. If an employee declines or fails to report to the new duty station as directed, an adverse action may be proposed, up to and including removal. The employee agrees to waive any rights to moving expenses if directed to return to the regular worksite.
- The employee may cancel the remote work agreement at anytime pursuant to DLAI 1035.01 and DLAM 1035.01.
- The remote work agreement will be reviewed annually and may not be extended beyond the original approved period.
- By signing this form, the employee agrees to the terms of the remote work agreement and understands failure to adhere to may result in termination of participation in the Remote Work Program.

19. SUPERVISOR SIGNATURE

20. DATE (MM/DD/YYYY)

21. EMPLOYEE SIGNATURE

22. DATE (MM/DD/YYYY)

### REMOTE WORK TERMINATION

23. TERMINATION DATE

24. INITIATED BY

☐ Employee

☐ Supervisor

25. REASON FOR TERMINATION

26. EMPLOYEE SIGNATURE

27. DATE (MM/DD/YYYY)

28. SUPERVISOR SIGNATURE

29. DATE (MM/DD/YYYY)

30. DLA CoS, DIRECTORS/COMMANDERS OF J CODES AND MSCs SIGNATURE

31. DATE (MM/DD/YYYY)

# SUPERVISOR - EMPLOYEE CHECKLIST

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## PRIVACY ACT STATEMENT

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1. EMPLOYEE

2. SUPERVISOR

THE FOLLOWING CHECKLIST IS DESIGNED TO ENSURE THAT THE REMOTE WORKER AND SUPERVISOR ARE PROPERLY ORIENTED TO THE POLICIES AND PROCEDURES OF THE REMOTE WORK PROGRAM. QUESTIONS 6, AND 7 MAY NOT BE APPLICABLE TO THE REMOTE WORK EMPLOYEE. IF THIS IS THE CASE, STATE NON-APPLICABLE OR N.A.

ITEM	DATE
3. Employee/Supervisor has read DLAI 1035.01, Telework and Remote Work and DLAM 1035.01, Telework and Remote Work.	
4. Employee has been provided with a schedule of work hours	
5. Employee: <input type="checkbox"/> has <input type="checkbox"/> has not been issued government furnished equipment. <input type="checkbox"/> N/A (skip to item 8)	
6. Equipment issued by DLA is documented and properly receipted. Check as applicable: Computer <input type="checkbox"/> Yes <input type="checkbox"/> No      Modem <input type="checkbox"/> Yes <input type="checkbox"/> No      Other <input type="checkbox"/> Yes <input type="checkbox"/> No Telephone <input type="checkbox"/> Yes <input type="checkbox"/> No      Fax machine <input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Policies and procedures for care of equipment issued by the Agency have been explained and are clearly understood.	
8. Policies and procedures covering classified, secure, or Privacy Act data have been discussed and are clearly understood.	
9. The supervisor will ensure that employees working from an alternate location are creating and storing records in accordance with DOD instruction 5015.02, "DOD Records Management Program" and all agency specific records management guidelines. DOD employees are not to use personal email accounts, hard drives, or commercial cloud/file sharing services for official business, or forward email from an official email account to a personal account.	
10. Requirements for an adequate and safe office space and/or area have been discussed, and the employee certifies those requirements are met.	
11. Performance and conduct expectations have been discussed and are understood.	
12. Employee understands that the supervisor may terminate employee participation, in accordance with established administrative procedures and union-negotiated agreements.	
13. Employee has participated in training.	
14. Supervisor has participated in training.	
15. Remote work agreement has been completed and signed.	
16. EMPLOYEE SIGNATURE	17. DATE (MM/DD/YYYY)
18. SUPERVISOR SIGNATURE	19. DATE (MM/DD/YYYY)

# SELF-CERTIFICATION HOME SAFETY CHECKLIST

Prescribed by: DLAI 1035.01  
Sponsor: Human Resources (J1)

1. EMPLOYEE

2. ORGANIZATION

3. REMOTE WORKSITE TELEPHONE NUMBER

4. REMOTE WORK ADDRESS

5. DESCRIBE THE DESIGNATED WORK AREA, E.G., BEDROOM, DEN, LIVING ROOM, ETC.

THE FOLLOWING CHECKLIST IS DESIGNED TO ASSESS THE OVERALL SAFETY OF THE REMOTE WORK SITE. EACH PARTICIPANT SHOULD READ AND COMPLETE THE SELF-CERTIFICATION HOME SAFETY CHECKLIST. A COPY OF THIS CHECKLIST SHOULD BE ATTACHED TO THE REMOTE WORK AGREEMENT.

ITEM	YES	NO
6. Are temperature, noise, ventilation, and lighting levels adequate to maintain your normal level of job performance?	<input type="checkbox"/>	<input type="checkbox"/>
7. Is all electrical equipment free of recognized hazards that would cause physical harm (frayed wires, bare conductors, loose wires, flexible wires running through walls, exposed wires fixed to the ceiling)?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the building's electrical system permit the grounding of electrical equipment?	<input type="checkbox"/>	<input type="checkbox"/>
9. Are aisles, doorways, and corners free of obstructions to permit visibility and movement?	<input type="checkbox"/>	<input type="checkbox"/>
10. Are file cabinets and storage closets arranged so drawers and doors do not open into walkways?	<input type="checkbox"/>	<input type="checkbox"/>
11. Are the phone lines, electrical cords, and extension wires secured under a desk or alongside a baseboard?	<input type="checkbox"/>	<input type="checkbox"/>

12. EMPLOYEE SIGNATURE

13. DATE (MM/DD/YYYY)