

Appendix B: Remote Working Assessment Form

Instructions: This form is to be completed by the supervisor/manager in consultation with the employee. Sections G and H are to be signed off by the supervisor and employee, respectively. Append this form to the Remote Working Agreement.

Date: Click or tap to enter a date.

A. Parties Details:	
Assessment Date: Click or tap to enter a date.	Employee ID #: Click or tap here to enter text.
Employee First Name: Click or tap here to enter text.	Manager First Name: Click or tap here to enter text.
Employee Last Name: Click or tap here to enter text.	Manager Last Name: Click or tap here to enter text.
Employee Job Title: Click or tap here to enter text.	Employee Job Title: Click or tap here to enter text.
Division: Click or tap here to enter text.	Department/Unit: Click or tap here to enter text.

B. Type of Remote Working Arrangement Requested:			
Indicate the type of remote working arrangement being considered. Review types listed under 7.0 of the Remote Working/Telework Policy.			
✓			
✓			
Occasional or as needed	<input type="checkbox"/>	Permanent remote worker	<input type="checkbox"/>
Temporary or Flexible	<input type="checkbox"/>	Critical Situation	<input type="checkbox"/>

C. Work Assessment:			
Check all boxes that apply.			
✓			
✓			
Job has a high level of autonomy and minimal requirements for face-to-face interactions	<input type="checkbox"/>	Job <u>does not</u> strictly require full-time in-person contact/customer service to support core functions of the College	<input type="checkbox"/>
Job requires reading, writing, research, working with data, or talking on the phone	<input type="checkbox"/>	Job does not rely upon specific equipment or supplies which require on-site working	<input type="checkbox"/>

Job can be done off-site without disruption to flows of work and communication	<input type="checkbox"/>	Job works with classified documents and remote working introduces a risk	<input type="checkbox"/>
Job is specifically contracted or developed to be executed remotely	<input type="checkbox"/>	Job has compliance requirements that cannot be effectively met in a remote working arrangement	<input type="checkbox"/>
Job can be executed with minimal disruption to student or employee services	<input type="checkbox"/>	Employee is in good standing (no disciplinary)	<input type="checkbox"/>
Job can be performed remotely in a similar manner as if it were being performed on campus	<input type="checkbox"/>	The employee competently demonstrates the competencies, knowledge and skills required to perform the job remotely	<input type="checkbox"/>
Job has clearly defined and measurable outputs/outcomes	<input type="checkbox"/>	Managing the employee's performance can be effectively done in the remote setting	<input type="checkbox"/>

State any other work characteristics that promote remote working:

[Click or tap here to enter text.](#)

D. Workplace Safety Assessment:

Confirm the employee has completed the Remote Workstation – Self-Assessment Safety Checklist, and confirm the following:

✓

The employee has provided a response plan in case of an emergency	<input type="checkbox"/>
The employee has indicated satisfactory working conditions	<input type="checkbox"/>
The employee has indicated satisfactory fire safety conditions	<input type="checkbox"/>
The employee has indicated satisfactory ergonomics conditions and have completed the ergonomic self-assessment	<input type="checkbox"/>
The employee has indicated satisfactory personal safety conditions	<input type="checkbox"/>

Indicate any concerns or supports the employee will require to achieve workspace safety:

[Click or tap here to enter text.](#)

Indicate any supports that Humber will provide:

[Click or tap here to enter text.](#)

E. Equipment and Resources:

✓ ✓

List all equipment and resources the employee will need to use in the execution of the job (include software, hardware, etc):	Provided by Employee	Provided by Humber
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>

F. Accommodation Assessment:

Note: If this request for remote working was initiated by the employee and is part of a request for an accommodation, indicate 'Yes' below. No further documentation is required as Accommodation is managed via a different process. The employee should contact:

Hiren Patel
 Senior Abilities and Accommodation Specialist
 416.675.6622, 4237
 Email: hiren.patel@humber.ca

Is this remote working arrangement part of an accommodation request?

Yes

No

G. Employee Attestations:

I have read and agree to adhere to the following policies: <ul style="list-style-type: none"> • Acceptable Use Policy for Technical Services Policy • Access and Privacy Policy • IT Security Policy 	<input type="checkbox"/>	I understand my commitments and the commitments of Humber College related to health and safety in the remote workspace:	<input type="checkbox"/>
I understand my commitments and the commitments of Humber related to the equipment and resources I use in my remote workspace:	<input type="checkbox"/>	I have read and understand the expectations on me as laid out in the Remote Working/Telework Policy:	<input type="checkbox"/>
Employee Name (PRINT): Click or tap here to enter text.		Employee Signature: Click or tap here to enter text.	
Date: Click or tap to enter a date.			

H. Manager Attestations:

I have completed all required assessments and have met with the employee to ensure the employee understands the requirements for remote working:	
Manager Name (Print): Click or tap here to enter text.	Manager Signature: Click or tap here to enter text.
Date: Click or tap to enter a date.	