OSU | **HUMAN RESOURCES**

Remote Work Suitability Assessment

Date Completed	
Supervisor Name	
Employee Name	
Employee CWID	
Position Title	
Department Name	

Section 1: Business Need

1	Does this remote work arrangement serve the best interests of the university?	☐ Yes	☐ No
2	Would a remote work arrangement enhance, maintain, or diminish operational efficiencies?	Enhance Maintain	Diminish
3	Does the addition of remote work arrangement(s) enhance the productivity of the department and the employees?	☐ Yes	☐ No

Notes:

Section 2: Position Suitability

1	Does the position require ongoing access to equipment, materials, and files that can only be accessed on campus?	☐ Yes	☐ No
2	Does the position require extensive face-to-face contact with students, supervisors, other employees, or the public?	☐ Yes	☐ No
3	Does the position require extensive time in meetings or on collaborative efforts within the department or other units/departments?	☐ Yes	☐ No
4	Does the position regularly perform work on campus or at a facility work location?	☐ Yes	☐ No
5	Does the position have job duties that require presence on campus or at a facility work location?	☐ Yes	☐ No

Notes:

Section 3: Employee Suitability

1	Are there concerns with the employee's performance history (including corrective action)?	☐ Yes	☐ No
2	Does the employee possess appropriate time management and organizational skills?	☐ Yes	☐ No

3	Does the employee have the necessary computer skills to complete their required job functions outside of the office?	☐ Yes	☐ No
4	Does the employee understand their role and expectations, and require little supervision to complete their tasks?	☐ Yes	☐ No
5	Can the employee's performance in a remote work setting be measured and evaluated?	☐ Yes	☐ No
6	Is the employee able to initiate tasks on their own and considered to be a selfstarter?	☐ Yes	☐ No
7	Does the employee consistently meet deadlines?	☐ Yes	☐ No

Notes:

Section 4: Supervisory Approach

1	Are you comfortable allowing this employee to work in a remote setting with less direct oversight?	☐ Yes		☐ No
2	How frequently do you monitor the employee's work performance?	Weekly	Monthly	Other
3	Are you comfortable communicating virtually with the employee?	☐ Yes		☐ No
4	Have you been successful in establishing clear objectives?	☐ Yes		☐ No
5	Can you accurately measure the employee's performance, outcomes, and time worked in a remote work setting?	☐ Yes		☐ No
6	Do you trust the employee will be productive without continuous supervision?	☐ Yes		☐ No

Notes:

Section 5: Team Effectiveness

1	Do team members frequently work on detailed and complex projects that require collaboration and partnership?	☐ Yes	☐ No
2	Does an employee's work location impact team work processes and efficiency?	☐ Yes	☐ No
3	Can the team sustain engagement in a remote or hybrid work environment?	☐ Yes	☐ No
4	Does the team possess resiliency to maintain trust and a strong team morale in the face of challenges?	☐ Yes	☐ No
5	Would the team support and embrace a work environment with a combination of on site and remote work arrangements?	☐ Yes	☐ No

Notes:

Summary

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.	☐ Yes ☐ No

☐ Business Need ☐ Position Suitability ☐ Employee ☐ Supervisory ☐ Team Effectiveness ☐ Suitability Approach
Notes:

Is there a maximum % of time or number of days feasible for remote work? If yes, please specify.	☐ Yes, _____ ☐ No
Does the department have the appropriate budget, equipment, and resources to support a remote work arrangement?	☐ Yes ☐ No

Remote Work Location. Please confirm remote location of work requested. Many states and localities have employment laws that differ from Oklahoma and may result in additional expense or risk exposure for departments and the university. All out-of-state requests require additional OSU HR review. Options: Oklahoma Other, specify state: *	_____ *(initials)*

Employee Immigration Status. Please confirm employee's immigration status. Due to the complexities of US immigration law and the possible need for additional documentation and certification within the Department of Labor **prior** to work commencing, any changes in work location regarding international employees require additional OSU HR review.
Options: Domestic   International*

Signatures

_____

Supervisor/Department Head

_____

Dean

_____

University Human Resources

_____

Vice President

_____

Date

_____

Date

_____

Date

_____

Date

*All out-of-state requests for remote work involving international employees require additional review by University Human Resources.