

Work from Home Guidelines for Staff Member Initiated Requests (1 or 2 days per week)

Principles

1. Work From Home (WFH) is a regularly scheduled and approved ongoing arrangement initiated by the staff member whereby s/he works from home for a maximum of 2 days per week.
2. A staff member and manager enter into a WFH agreement recognising that it is in the best interest of the University/Group/Department and the staff member with respect to satisfying the requirements of the job.
3. The primary place of work is the University of Waterloo and a permanent ongoing work station/office will remain available for the staff member.
4. Any Work From Home arrangement is at the sole discretion of the Manager.

Considerations

1. The motivation for the WFH arrangement is not the provision of dependent care by the staff member at home while working.
2. Does the nature of the work and requirements of the job allow the staff member to work successfully from home on an ongoing basis? If so, for how many days per week?
3. Is it practical and an efficient use of resources for the work to be completed by the staff member working from home?
4. What additional resources are required (e.g., print resources, computer equipment, or internet access)? If additional resources are required, does the staff member understand that provision of these resources is normally his/her responsibility?
5. Can output be monitored and/or measured?
6. Will there be an impact on the work of others (e.g., department meetings, service desk schedules, availability to other members of the university during usual business hours, supervision of or collaboration with other members of the department)? If so, can the impact be accommodated by the staff member or the department?
7. Is there agreement on how flexible the staff member can or will be regarding shifting the arrangement to accommodate for departmental needs for a particular time period (e.g., a specific week or term)?

The Agreement

1. Where a WFH proposal is approved, the terms and conditions of the agreement are recorded using the accompanying attachments.
2. Signed copies of the agreement are retained by the manager, staff member, and Human Resources.
3. Human Resources records and tracks WFH agreements university-wide.

WFH PART A – STAFF MEMBER INITIATED WORK FROM HOME REQUEST FORM

Principles

1. Work From Home (WFH) is a regularly scheduled and approved ongoing arrangement initiated by the staff member whereby s/he works from home for a maximum of 2 days per week.
2. A staff member and manager enter into a WFH agreement recognising that it is in the best interest of the University/Group/Department and the staff member with respect to satisfying the requirements of the job.
3. The primary place of work is the University of Waterloo and a permanent ongoing work station/office will remain available for the staff member.
4. Any Work From Home arrangement is at the sole discretion of the Manager.

Staff Member Details:	
Staff Member Name:	
Position:	
Home Office Address:	
Home Office Phone:	
Email:	
Days at home based work site per week:	
Days at University work site:	
Commencement Date:	
End Date (if known): No longer than 12 months	
Summary of work to be performed at home based work site:	
Working From Home Self-Assessment Checklist attached (WFH PART B):	Yes <input type="checkbox"/>

Declaration:		
I have read and understood the conditions set out in this Working from Home Agreement. I indicate my acceptance of the terms of this agreement by signing below.		
Staff Member:	Signature:	Date:
Direct Manager:	Signature:	Date:

Approved:		
Department Head:	Signature:	Date:

Please return this signed form (WFH PART A) and the signed "Working from Home Self-Assessment Checklist" (WFH PART B) to your **Human Resources Advisor** for retention purposes.

WFH PART B – WORKING FROM HOME SELF ASSESSMENT CHECKLIST

This checklist is to be completed by staff members intending to work from home in discussion with the manager of the department. This checklist should be completed prior to the staff member commencing a working from home arrangement to determine if a work from home arrangement is appropriate.

Staff Member Details:	
Staff Member Name:	
School/Unit:	
Phone:	
Email:	

Supervisor Details:	
Supervisor Name:	
School/Unit:	
Phone:	
Email:	

Checklist:	
QUESTIONS THAT SHOULD BE ANSWERED BY BOTH THE MANAGER AND THE STAFF MEMBER	
Does the nature of the work and requirements of the job allow the staff member to work successfully from home on an ongoing basis?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Does the staff member understand that he/she must properly secure and ensure the privacy of any records he/she takes home?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is a WFH arrangement a practical and an efficient use of resources for the work to be completed from home?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is the staff member going to be looking after other dependent family members while at home?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Can the work being performed at home be easily measured?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are there going to be distractions in the home such as small children, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Will there be an impact on the work of others (e.g., department meetings, service desk schedules, availability to other members of the university during usual business hours, supervision of or collaboration with other members of the department)? If so, can the impact be accommodated by the staff member or the department?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is there agreement on how flexible the staff member can or will be regarding shifting the arrangement to accommodate for departmental needs for a particular time period (e.g., a specific week or term)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Does the staff member understand that this relationship can be stopped at the request of either party?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is the home office a dedicated space that meets ergonomic requirements to minimize the risk of injury due to musculoskeletal disorders? (www.safetyoffice.uwaterloo.ca/hse/ergonomics/ergoguide.htm)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
The staff member understands that other staff members may use their dedicated space in their absence.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
DATE COMPLETED:	

Actions or equipment required:
<i>What additional resources are required (e.g., print resources, computer equipment, or internet access)? If additional resources are required, does the staff member understand that provision of these resources is normally his/her responsibility?</i>