

U.S. DEPARTMENT OF AGRICULTURE	USDA Telework Agreement AD-3018
--------------------------------	--

Check one of the following: New Agreement Revision Opt Out (see below)

The following constitutes a Telework agreement between the United States Department of Agriculture (USDA), and _____
(Employee Name: First, Last, Middle Initial)
 _____ detailing the terms and conditions of the Telework Program.
(Employee Official E-Mail)

(Supervisor Name: First, Last, Middle Initial) _____
(Supervisor Official E-Mail)

Agency/Mission Area/Staff Office: _____ Organization/Division: _____

Tour of Duty/Basic Work Requirement: Standard Compressed (5-4-9) Compressed (4-10)
 Flexible (Maxiflex or Other Variable) Other: _____

Work Schedule: Full Part-Time Intermittent Seasonal Other: _____

Type of Appointment: Full Part-Time Intermittent Seasonal Other: _____

Indicate whether the employee occupies the following designation(s) during unique situations and predetermined conditions when emergencies dictate as adopted by the Agency Coop Plan:

Emergency Essential Mission Critical N/A

Telework Category: Core Telework (Regular/Recurring) Situational/Ad hoc/Unscheduled

Primary Telework Location: Residence Satellite Office Telework Center

The physical location at which the employee is designated to work:

(Telework Physical Address): _____
(Dfcj JXYcb mjZU'cWUjcb cH Yf 'h Ub F YgJXYbWV. Street Address/ City/ State/ Zip Code)

Designated Core Telework Schedule:

Week 1: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Week 2: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Employee has completed required Telework Training: Yes Date Completed: _____

Supervisor has completed required Telework Training: Yes Date Completed: _____

Estimated Total Number of Commuting Miles Saved Per Period: _____ Per Year: _____

Notes

1. This telework agreement shall correspond with the employee's approved transit subsidy benefits. It is the employee's responsibility to adjust and re-certify their transit subsidy authorizations to ensure alignment with this telework agreement.
2. Employee requests participation in the program and will adhere to the applicable guidelines, policies, and law. Agency concurs with employee participation and agrees to adhere to the applicable guidelines, policies, and law.
3. Employee understands that unscheduled telework or unscheduled leave may be used with supervisory notification during periods of Unscheduled Telework authorization due to weather or other emergencies. An employee performing unscheduled or regularly scheduled telework: **1)** is expected to work all regularly scheduled hours on days when unscheduled telework is announced or to request unscheduled leave from the supervisor; and **2)** is expected to work all regularly scheduled hours when unscheduled telework is announced and weather-related delayed arrival or early departure is authorized or request unscheduled leave from the supervisor.

4. Employee's official tour of duty must include at least a 30-minute uncompensated lunch.
5. Employee understands requirements for an adequate and safe office space and that these requirements must be met.
6. Employee's Time and Attendance (T/A) for all official duty time spent in a Teleworking status will be recorded using the proper Telework time code.
7. Employee agrees to follow policy for requesting and obtaining supervisory approval of leave.
8. Employee is covered under the Federal Employee's Compensation Act in the course of performing official duties at the alternate work location or official duty station. Any accident or injury which occurs at the alternate work location must be brought immediately to the attention of the supervisor.
9. Employee's most recent performance rating must be at least equivalent to "fully successful" (e.g., 'pass').
10. Employee understands that telework is not a substitute for dependent care (child care or elder care) and that appropriate arrangements must be made to accommodate children and adults who cannot care for themselves, while performing official duties in a residential office.
11. Employee will apply approved safeguards to protect Government records from unauthorized disclosure or damage and will comply with the provisions set forth in the Privacy Act of 1974, Public Act of 1974, Public Law 93-579, codified at Title 5, U.S.C., Section 55a.
12. This Telework agreement should be reviewed and discussed between the employee and supervisor on an annual basis.
13. Employees must have an approved Core or Ad Hoc Telework agreement in place, as well as available work, to include professional development activities, appropriate equipment, or other means necessary to be able to perform work and stay connected, in order to be considered Telework ready.

FOR THOSE EMPLOYEES THAT OPT-OUT:

- I fully understand that I am eligible to participate in USDA's Telework Program. I acknowledge that I have been notified of my status and at this time, voluntarily decline to participate in Telework in any capacity.
- I understand that I may re-visit my decision to participate in the Telework Program at any time, provided that I meet the eligibility and suitability requirements and complete a revised Telework Agreement Form.

TO BE COMPLETED BY SUPERVISOR: APPROVED DISAPPROVED RETURNED FOR CORRECTION

REASON FOR DISAPPROVAL:

- Eligible employees are not expected to receive a performance rating of at least "fully successful."
- Position duties require physical presence on a daily, every work day, basis and do not include any portable or administrative work that can be accomplished during any portion of a duty day from an alternate office or location.
- Position duties require access to and/or use of specialized equipment on a daily, every work day basis, located only at the traditional worksite and do not include any portable or administrative work that can be accomplished during any portion of a duty day from an alternate office or location.
- Position duties require access to the handling of classified materials on a daily, every work day basis, and do not include any portable or administrative work that can be accomplished during any portion of a duty day from an alternative office or location.
- Employee has received a less than fully successful performance rating within the past 12 months.
- PERMANENT INELIGIBILITY pursuant to telework statute and Departmental Regulation.**

Employee's Signature	Date Signed
Supervisor's Signature	Date Signed
Program Coordinator's Signature	Date Signed

Please return this form to:
<Agency/Mission Area/Staff Office information here>

Attention: Telework Program Coordinator

SECURITY CHECKLIST

Information Sensitivity

Has the employee been trained to recognize and handle sensitive but unclassified/sensitive security information (SBU/SSI) in a telework environment?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Has a locked file cabinet been identified/provided to secure SBU/SSI files, records, papers or electronic media?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<i>If SBU/SSI. Note: Employee Owned Equipment cannot be used.</i>	
A review of the job duties and responsibilities has been completed.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, review completed – No issues related to level of sensitivity were noted from the review.	<input type="checkbox"/> Yes <input type="checkbox"/> No

WorkStation Configuration

<p>Employee has been issued the following equipment specifically for the purpose of Telework:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Computer <input type="checkbox"/> Software <input type="checkbox"/> Modem <input type="checkbox"/> Printer <input type="checkbox"/> Other <input type="checkbox"/> N/A <p><i>Government-Owned Equipment (GOE), refers to agency owned equipment which is issued specifically for telework purposes – this does not include equipment such as laptops that a telework employee uses at the official duty station and alternate work locations.</i></p>	<p>Telework Connection Requirements</p> <ul style="list-style-type: none"> <input type="checkbox"/> Telephone/modem line <input type="checkbox"/> Direct Internet/Wireless Connectivity <input type="checkbox"/> Not applicable
---	--

Please return this form to:
<Agency/Mission Area/Staff Office information here>

Attention: Telework Program Coordinator