

# Flexible Work Arrangement Evaluation

The following evaluation is to be completed by the supervisor of the employee participating in a flexible work arrangement at the end of the initial review period (90 days) and annually before signing a new agreement.

1. Did you notice any change in productivity during this trial period? Please indicate.

No change

Employee was more productive than usual

Employee was less productive than usual

2. During the trial period, did communication with you and other staff:

Improve

Remain the same

Decrease

3. As the supervisor of an employee on a Flexible Work Arrangement, did you encounter any problems or issues as a result of the arrangement? Check all that apply.

Communication with the employee was difficult

Scheduling meetings was difficult

I received complaints from co-workers

I received complaints from colleagues outside the department

I received complaints from customers

I can't really tell how much the employee accomplished

Employee worked too long

Employee wasn't available during the hours scheduled

Other (please specify)

4. Did you experience any advantages? Check all that apply.

Another employee was able to use the employee's office space and equipment while they were away from the office

Telecommuter's attitude has changed in a positive manner

Telecommuter is using less leave since the arrangement started

Other (please specify)

5. Overall the current work arrangement is:

Working well

Working satisfactorily

Not working well

6. What can be done to improve the flexible work arrangement?

Recommendation:

Continue

Discontinue

If recommending continuation of the Flexible Work Arrangement, list any additional conditions placed on the arrangement.

### **Signatures**

Date: \_\_\_\_\_ Supervisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Employee Signature: \_\_\_\_\_

Original signed document to be filed in Human Resources. The employee and supervisor must keep copies. Flexible Work Agreements must be, at a minimum, reviewed at the end of the initial review period and annually with a new signed agreement submitted to HR.

### **Reviewed by Human Resources:**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_