

Maryland National Guard Telework Plan and Application Form

Please complete, sign, and return this form to your supervisor.

1. Mark your choice:

_____ I wish to work from home.

_____ I wish to work at an approved telework facility. Location _____

_____ I would like to work at the following site. Location _____

2. Determine if you are interested in teleworking on a regular or situational basis.

_____ Situational Telework - No regular schedule, occasionally, or as needed for special projects or continuity of operations programs plan.)

_____ Regular Telework - Typically at least one workday per pay period at an alternate worksite. Circle "week" or "pay period" depending on how frequently you are requesting to telework. Place a number "1" in the box corresponding with the day you would most like to work at an alternate site as your first choice. Place a number "2" in the box corresponding with the day you would like to work at an alternate site as your second choice.

Day	Per Week or Pay Period	Duty Hours (specify hours of work and lunch break)
Mon		
Tuesday		
Wednesday		
Thursday		
Friday		

3. On a separate sheet of paper please answer the following: Why you wish to telework. What tasks you plan to accomplish while teleworking. How you plan to accomplish work at an alternate site in an equal or more productive way. Be specific as to the type of work you will perform and how it will be evaluated for performance. Explain how you will communicate your status to your supervisor when teleworking.

It is understood that each plan may contain unique characteristics to ensure the agreement benefits the agency and employee in the scope of mission, effectiveness and productivity.

NAME _____ DATE _____

ORGANIZATION _____