



**U.S. DEPARTMENT OF ENERGY
OFFICE OF SCIENCE – FIELD
ANNUAL TELEWORK RECERTIFICATION**

Employee's Name:	Supervisor's Name:
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Type of Telework: Routine Situational Routine/Situational Medical
Medical - Requires a physician statement.

Pay Period Work Week	Day	Hours of Work	
		Official Worksite (From – To)	Telework Site (From – To)
Week 1	Monday		
	Tuesday		
	Wednesday		
	Thursday		
	Friday		
Week 2	Monday		
	Tuesday		
	Wednesday		
	Thursday		
	Friday		

The following is designed to help the Supervisor assess an employee's eligibility to continue to telework.		
	Yes	No
1. Do the work assignments and responsibilities of the employee's current position warrant continued participation?		
2. Is the employee's most recent performance rating at least at the Meets Expectations level?		
3. Does the employee demonstrate the ability to work independently?		
4. Is the employee able to maintain the quality and quantity of his or her work?		

Re-certification Approved	Re-certification Disapproved. Attach Reason
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I have reviewed and discussed the re-certification criteria and decision with the employee.

Supervisor's Signature	Date
Employee's Signature	Date

PRIVACY ACT STATEMENT

The Telework Enhancement Act of 2010 (Public Law 111-292), Section 6120 of Title 5 to the United States Code, and Executive Memorandum of July 11, 1994 (59 FR 36017) authorizes collection of this information. Providing information and signing this agreement is voluntary, but failure to sign this agreement will preclude the authorization for the employee to telework. The primary use of the information contained in this agreement is by applicable management officials and supporting administrative staffs, payroll and accounting staffs, human resource staffs, the applicable Departmental element's Telework Coordinator, and travel and transportation staffs to approve and record the employment situation. There are no additional uses that may be made of the information collected in the agreement. The official copy of this agreement, which is a category of record included in the OPM/GOVT-1 General Personnel Records system, is maintained by the applicable Telework Coordinator.

Distribution If Approved: Original: Telework Coordinator Copy: Employee, Supervisor, and Timekeeper	Distribution If Disapproved: Original: Employee Copy: Telework Coordinator
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