

**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
D.C. Department of Human Resources**

**TELECOMMUTING STATUS REPORT**

The following status report is designed to assess the overall performance of the telecommuting program. Each supervisor should complete a report on each participant in the program under their direct supervision. Upon completion the report should be submitted to the *Telecommuting Program Coordinator*.

Supervisor's Name: \_\_\_\_\_ Agency/Division: \_\_\_\_\_

Position Title/Series/Grade: \_\_\_\_\_

Name of Telecommuter you supervise: \_\_\_\_\_

Report Period: From: \_\_\_\_\_ To: \_\_\_\_\_

Commuting Miles per Day (Round Trip) \_\_\_\_\_

Please answer the following questions:

1. On the days your employee telecommuted, did he/she communicate with you for assistance or direction? If so, what were the reasons for the communication? Check all that apply:

	<b>No. of Calls</b>	<b>Average Length of Calls</b>
<input type="checkbox"/> a. General work direction or questions	_____	_____
<input type="checkbox"/> b. Employee needed information to do work	_____	_____
<input type="checkbox"/> c. Equipment problems	_____	_____
<input type="checkbox"/> d. Schedule problems or changes	_____	_____
<input type="checkbox"/> e. Requested leave for personal illness	_____	_____
<input type="checkbox"/> f. Requested vacation leave	_____	_____
<input type="checkbox"/> g. Requested any other type of leave	_____	_____
<input type="checkbox"/> h. Other (please specify): _____	_____	_____

(Over)

2. Did you notice any change in your employee's productivity during this report period? If so, what was the nature of the change. Check applicable answer:

- ☐ a. No change.
- ☐ b. Increase in productivity than usual.
- ☐ c. Decrease in productivity than usual.

3. As a supervisor, did you experience any problems as a result of telecommuting? Check all that apply:

	RATE				
	Minor Problem			Major Problem	
	1	2	3	4	5
a. Communication with telecommuter was difficult.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Scheduling meetings or conferences was difficult.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Complaints from co-workers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Complaints from colleagues outside of work unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Complaints from public or officials from outside of agency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Employee didn't work hours he/she was scheduled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Employee worked too long while telecommuting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. I'm not sure how much telecommuter accomplished.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Indicate whether you notice any of the following advantages? Check all that apply:

	RATE				
	Minor Problem			Major Problem	
	1	2	3	4	5
a. Other employees could use the telecommuter's space and equipment during the day he or she was not present.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(Over)

	RATE				
	Minor Problem			Major Problem	
	1	2	3	4	5
b. Improvement in Telecommuter's demeanor towards work or assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Telecommuter was able to work even though he/she was mildly ill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Telecommuter used less vacation time than might have been expected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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5. General comments (optional):

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