**Working from Home Application form & Agreement**

Employee’s Name…………………………………………………………………………

Position……………………………………. Work Area…………………………………

Manager/Team Leader/Team Leader…………………………………………………….

 Full Time  Part Time (please √ whichever is appropriate)

Hours worked per week……………………………………

HOME BASED WORK SITE

Address …………………………………...……………………………………………….

Home telephone number……………………. Other contact numbers………….……...…

DURATION OF WORKING FROM HOME AGREEMENT

Proposed Commencement Date………………….…

Review date……………………….

Proposed working hours (including provision for breaks) and location:

|  |  |  |
| --- | --- | --- |
| Location | Home | Office |
| Day | Start time | Finish time | Start time | Finish time |
| Monday |   |   |   |   |
| Tuesday |   |   |   |   |
| Wednesday |   |   |   |   |
| Thursday |   |   |   |   |
| Friday |   |   |   |   |
| Saturday |   |   |   |   |
| Sunday |   |   |   |   |

Details of work to be completed at the Home-Based Work Site:

Details of equipment and materials required to undertake work at home

* If my request to work from home is approved, I agree to my nominated home-based work site being assessed at a mutually convenient time
* I have read the [TAFE] Policy & Procedures on Working from Home and agree to abide by the principles contained therein
* I have discussed my proposed work-plan with my Manager/Team Leader and we have agreed the work priorities

Applicants Signature………………………………………….Date……………………..

Manager:

Approved: Yes / No

Signed ………………………………………………….

Print Name …………………………………………….

Date: ………………………….