

Flexible Work Arrangement Suitability Assessment for Staff Positions	Date Completed	
	Supervisor Name	
	Employee Name	
	Department/Unit	
	Position Title	
	Position Number	

Section 1: Business Need

1	Would a flexible work arrangement enhance, maintain, or diminish operational efficiencies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Enhance	Maintain	Diminish
2	Does the addition of flexible work arrangement(s) enhance the productivity of the department and the employees?	<input type="checkbox"/>	Yes	<input type="checkbox"/>
				No

Notes:

Section 2: Position Suitability

1	Does the position require ongoing access to equipment, materials, and files or specialized space/equipment/technology that can only be accessed on site?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2	Does the position require in-person service delivery to students, supervisors, other employees, or the public?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3	Does the position require co-located collaborative efforts within the department or other units/departments?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
4	Does the position have job duties that require an in-person presence on site? If yes, please document these duties in the <i>Notes</i> below.	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Notes:

Section 3a: Current/Incumbent Employee Suitability *(for current Dartmouth employees)*

1	Does the employee possess appropriate time management and organizational skills?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2	Does the employee have the necessary computer skills to complete their required job functions outside of the office (e.g. fluency in Zoom, MS Teams, SharePoint, OneDrive, and other relevant software)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3	Does the employee understand their role and expectations, and require little supervision to complete their tasks?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
4	Can the employee's performance in a flexible work setting be measured and evaluated?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
5	Is the employee disciplined and able to initiate tasks on their own (considered to be a self-starter)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
6	Does the employee consistently meet deadlines?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
7	Is the employee able to meet work performance and/or productivity levels whether onsite or working elsewhere?	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Yes
				<input type="checkbox"/>	No
8	If any work is completed off-site, does the employee have access to stable high-speed internet to be able to complete their tasks, and communicate with their supervisor and team?	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Yes
				<input type="checkbox"/>	No

Notes:

Section 3b: New Employee/Supervisor Suitability (*vacant positions/employees new to Dartmouth*)

1	Have you discussed with this candidate's references whether they had concerns with the employee's ability to work in the proposed flexible work arrangement successfully, and feel confident that the flexible work arrangement is one in which this new employee is likely to be successful?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2	Are there frequent, structured supervisory check-ins scheduled between the supervisor and employee to allow for the supervisor to provide support and assess the new employee's time management and organizational skills?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3	Is there a plan in place to support and train this new employee on the necessary computer skills to complete their required job functions outside of the office?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4	Are there clear and documented work expectations, goals, and deadlines for the work to be performed in this position?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5	Can the employee's performance in a flexible work setting be measured and evaluated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Notes:

Section 4: Supervisory Suitability

1	How frequently do you plan to monitor the employee's work performance?	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Other
2	Have you set expectations regarding communicating virtually or in an alternate manner with the employee if appropriate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3	Have you developed and communicated clear objectives and goals for this position?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
4	Can you accurately measure the employee's performance, outcomes, and time worked in the proposed flexible work setting?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
5	Have you determined the strategies you will use to incorporate the FWA employee into daily workflows and meetings?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6	(<i>answer only if you completed 3b</i>) Do you commit to the additional time necessary within the first 90 days to support and provide clear feedback regarding your new employee's transition and learning so that they are able to become a self-starter within your team in their flexible work arrangement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Notes:

Section 5: Team Effectiveness

1	Do team members frequently work on detailed and complex projects that require co-located collaboration and partnership?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2	Does an employee's work location impact team work processes and efficiency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3	Can the team sustain engagement in a flexible or hybrid work environment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4	Does the team possess resiliency to maintain a strong team morale in the face of challenges?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5	Would the team support and embrace a work environment with a combination of on site and flexible work arrangements?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Notes:

Summary

Based on the collective responses to the assessment questions, do you recommend this position be considered for a flexible work arrangement? If no, please indicate the primary business reason/suitability factor below.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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<input type="checkbox"/> Business Need	<input type="checkbox"/> Position Suitability	<input type="checkbox"/> Employee Suitability	<input type="checkbox"/> Supervisory Suitability	<input type="checkbox"/> Team Effectiveness
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Notes:

Is there a maximum % of time or number of days feasible for flexible work? If yes, please specify.	<input type="checkbox"/> Yes, _____ <input type="checkbox"/> No
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Does the department have the appropriate budget, equipment, and resources to support a flexible work arrangement?	<input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
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Flexible Work Location. Many states and localities have employment laws that differ and may result in additional expense or risk exposure for departments and Dartmouth. Supervisor has referenced the Payroll [State Tax Withholding](#) website or contacted Dartmouth.Payroll@Dartmouth.EDU to inquire about a specific location if appropriate. Supervisor also confirms that they have directed the FWA employee to the same resources if appropriate. _____
(initials)

Signatures

Supervisor

Date

Department Head

Date