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| **Remote working details** – all staff |
|  |
| **Employee name** |  | Employment mode | <Select mode> |  |
|  |
| Positiontitle |  | Campus |  |  |
|  |
| Portfolio | <Select portfolio> | Institute/Directorate |  |  |
|  |
|  | Please state the address of the**proposed remote work location** |  | **Federation University equipment**to be used at the remote work location |  |
|  |  |  |  |  |
|  |
|  | **Agreement timeframe** – maximum 12 months (annual OHS review required) |  |
|  |  |  |  |  |
|  | **Start** date | Click to enter date |  |  | **End** date | Click to enter date |  |  |
|  |  |  |  |  |
|  |
|  | **I confirm I have reviewed** the following guides on workstation ergonomics |  |
|  | [ ]  [How to select and use a chair](https://youtu.be/T85PAd0hG3U) |  | [ ]  [How to work from home on your computer](https://youtu.be/WuxJo-vK_vw) |  |
|  |
|  | [ ]  [How to set up your workstation](https://youtu.be/jFujvZxx9JU) |  | [ ]  [How to stay active with computer-based work](https://youtu.be/ULofWmtCfi8) |  |
|  |
| **Workstation environment** |
| Is the floor space free from tripping hazards (cables, etc)? | [ ]  Yes [ ]  No |
| Is lighting adequate for the tasks being performed? | [ ]  Yes [ ]  No |
| Are noise levels acceptable? | [ ]  Yes [ ]  No |
| Is the room temperature comfortable – heating and cooling as required? | [ ]  Yes [ ]  No |
| Are there adequate power outlets to run the computer and other equipment? | [ ]  Yes [ ]  No |
| Is the computer protected by a circuit breaker? | [ ]  Yes [ ]  No |
| **Workstation size** |
| Is the desk size suitable for the duties to be performed? (See [Office-based workstation guidelines](https://federation.edu.au/__data/assets/pdf_file/0020/155441/Office-based_Workstations_Guideline.pdf) - section 2) | [ ]  Yes [ ]  No |
| Is the desk height adjustable? | [ ]  Yes [ ]  No |
| Is the desk height between 680mm–720mm from the floor? | [ ]  Yes [ ]  No |
| Is there adequate leg space to allow free movement under the desk? | [ ]  Yes [ ]  No |
| Is the desk a single, continuous surface? | [ ]  Yes [ ]  No |
| Is a footrest available? | [ ]  Yes [ ]  No |
| **Work surface layout** |
| Is a document holder used when transcribing from hard copy to computer? | [ ]  Yes [ ]  No [ ]  N/A |
| Do you have an appropriate headset? | [ ]  Yes [ ]  No [ ]  N/A |
| Are items used frequently within easy reach from the normal working position? (e.g: folders, manuals) | [ ]  Yes [ ]  No  |
| Is there adequate easily-accessible storage space for less frequently used items? | [ ]  Yes [ ]  No  |
| **Workstation environment** |
| Is the chair fully adjustable?  | [ ]  Yes [ ]  No |
| Does the chair have a five-star stability base? | [ ]  Yes [ ]  No |
| Does the chair have adequate lumbar support? | [ ]  Yes [ ]  No |
| Are your feet flat on the ground or footrest when using your chair? | [ ]  Yes [ ]  No |
| Is the fabric and padding of the chair adequate? | [ ]  Yes [ ]  No |
| **Computer placement, keyboard, mouse and printer** |
| Is the computer monitor approx. 600mm (arm’s length away) from the user? | [ ]  Yes [ ]  No |
| Is the top edge of the computer monitor at the eye level of the user? | [ ]  Yes [ ]  No |
| Is the centre of the computer screen approx. 400mm above the desk surface? | [ ]  Yes [ ]  No |
| Is the computer monitor free from glare and reflections from lights, etc? | [ ]  Yes [ ]  No |
| Can the contrast and colour of the monitor be easily adjusted to be easy to read? | [ ]  Yes [ ]  No |
| Can the angle or position of the monitor be easily changed? | [ ]  Yes [ ]  No |
| Is the keyboard at a comfortable tilt angle or flattened for touch typing? | [ ]  Yes [ ]  No |
| Is the mouse directly beside the keyboard on your preferred side? | [ ]  Yes [ ]  No |
| Does the mouse glide easily across the mouse pad? | [ ]  Yes [ ]  No |
| Is a printer available? | [ ]  Yes [ ]  No |
| If a printer is available, is it placed within unobstructed reach? | [ ]  Yes [ ]  No |
| Is internet access available? | [ ]  Yes [ ]  No |

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| **Employee** |
| I confirm that the information provided in this document is true and correct to the best of my knowledge and that I will comply with all relevant University regulations, policies and procedures while working remotely. |
| **Employee**signature |  | **Date** | Click to enter a date |  |
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| **Manager/Supervisor** |
|  |
| **Manager/Supervisor** signature |  | **Name**  |  |  |
|  |
| **Title** |  | **Date** | Click to enter a date |  |
|  |
|  |  |

**Following manager/supervisor authorisation**, a copy of this checklist should be sent to:

1. the employee; and
2. People and Culture (via our [People and Culture ServiceNow portal](https://federation.service-now.com/pc)) for filing.

**For queries** regarding this form, please contact People and Culture for further guidance.

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| **General/professional staff**, please return your approved [**Flexible Work Agreement request form**, with your **self-assessment checklist**](#Flexible). |