



Home Office Checklist

EMPLOYEE NAME

Use this form to plan for and document home-office setup

Employee Teleworks:	Number of Days Per Week Regularly Telework						
	Occasionally	1	2	3	4	5+	In field / travels
Security/Sensitivity of Information Employee Handles:	Low	Moderate			High		

Office Set-up	Yes	No	Not Required	Notes / Explanation
Adequate desk or work station				
Comfortable & supportive office chair				
Good lighting				
Adequate storage				
Sufficient electrical outlets				
Have you performed an office safety check?				
If small children are around, have you child-proofed your office?				

Computer Equipment	Notes / Explanation
Type of unit: No computer required Desktop Laptop	
Provided by: Employer Employee	
Approved by management: Yes No	

Internet Connection	Notes / Explanation
Type of Connection: Dial up DSL/Cable Other	
No connection required	
Approved by management: Yes No	

Telephone	Employee provided	Employer provided	Not Required	Notes / Explanation
Call forwarding from office				
Voice mail / Answering service				
Cellphone				
Cellular Hotspot				
Telephone conferencing				
VOIP				
Other:				
Approved by management: Yes No				

Office Equipment	Employee provided	Employer provided	Not Required	Notes / Explanation
Printer				
Fax				
Scanner				
Answering machine				
Webcam				
Other:				
Approved by Management:	Yes	No		

Security	Employee provided	Employer provided	Not Required	Notes / Explanation
Firewall				
Anti-Virus				
VPN				
Encryption				
Other:				
Approved by Management:	Yes	No		

Storage	Employee provided	Employer provided	Not Required	Notes / Explanation
Flash Drive / Disks				
Other:				
Approved by Management:	Yes	No		

Employee Signature

Date

Manager Signature

Date