

# Alaska Court System

## Telework Request Form

New Request (1 year max): \_\_\_\_\_ Renewal Request (1 year max): \_\_\_\_\_

This form is to be completed by the employee's supervisor.

### Employee Information

Name: \_\_\_\_\_

Employee ID: \_\_\_\_\_

Job Title: \_\_\_\_\_

Position # (PCN): \_\_\_\_\_

Department: \_\_\_\_\_

Location: \_\_\_\_\_

### Telework Information

Reason for request:

Benefits to the court system and the employee:

Position's suitability for teleworking:

Employee's suitability for teleworking:

**Work Plan:** Provide a description of the duties to be performed and how work product and output will be assessed for performance.

**Duties to be performed:**

**Method of assessing performance:**

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Area Court Administrator, Clerk of the Appellate Courts, or Administrative Director Approval**

**Request Approved:** ☐ Yes, forward request to HR  
☐ No, because:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_

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**Human Resources Approval**

**Request Approved:** ☐ Yes. Supervisor must complete *Telework Agreement* with employee.  
☐ No, because:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_

**Supervisor Notification:** Supervisor notified of the decision on \_\_\_\_\_ (date).