



## **U.S. DEPARTMENT OF THE INTERIOR**

### **Guidance for Completion of eFORMs – DI-3457**

February 2015

The electronic version of the Telework Agreement Form (DI-3457) was launched on January 12, 2015. The Department of the Interior's automated version of the DI-3457 is available for use immediately and will replace the hard copy of the form. Bureaus/offices can access the link to the electronic form at: <https://eforms.doi.gov>.

This guide can be found at the DOI Telework website at:  
<http://www.doi.gov/telework/policies.cfm>.

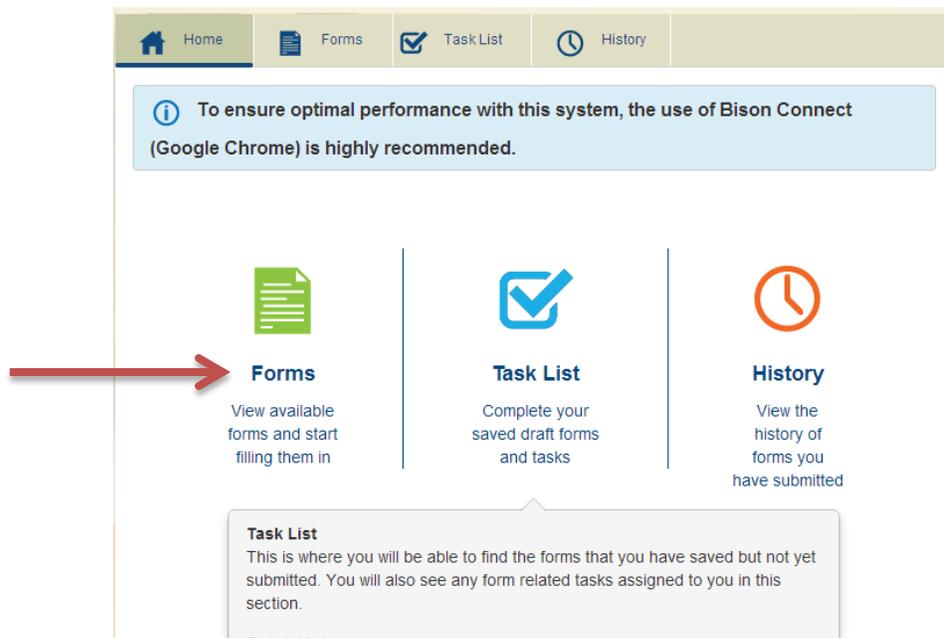
## Initiating a Telework Agreement-Employee

### Introduction:

The DOI telework agreement is first initiated by the employee and then sent to the supervisor via e-mail after the employee has completed the safety check-list, reviewed the DOI Handbook, and the supervisor and employee have both completed the training on DOI Learn.

The link to the electronic form is: <https://eforms.doi.gov>

Please note that DOI network access (i.e., VPN) is required at this time in order to access the e-forms website. Click on Forms as the illustration below indicates.



To find the form, you can either use the **Search** function or scroll down to the DI-3457 form. Once you find the form, click on the **Open Form** button next to the form name.



You will be asked to accept the Terms and Conditions. By accepting, you are certifying that you have read [the DOI Handbook](#), finished the [safety check-list](#), reviewed the [Telework Agreement walk-through](#), and the supervisor and employee have both completed the required training on [DOI Learn](#).



### DI-3457: Telework Agreement

**i Terms and Conditions**

Before viewing the DI-3457: Telework Agreement form, you must have read the U.S. Department of the Interior's Telework Handbook (370 DM 226) that establishes Department-wide policies and procedures for the proper implementation of all Federal laws, Executive Orders, regulations, and polices related to telework. You should have also completed the Safety Check-list, reviewed the Telework Form walk-through, and finished the required training. In addition, by accepting these Terms and Conditions, you agree and are bound to applicable Bureau and Department-wide policies and procedures.



By clicking the "Accept" button, you agree to be bound by the Terms and Conditions.

When you accept the Terms and Conditions, the first button will ask you whether or not you are initiating for and behalf of someone else.

Are you initiating this form on the behalf of someone else?\*

**PRIVACY ACT STATEMENT**

**AUTHORITY:** 5 USC 301 and 5 USC Part III, Subpart E, Chapter 65.  
**PURPOSE:** The principal purpose for collecting the information is to determine employee eligibility for participation in the telework program.  
**ROUTINE USES:** The information will be used to manage employee telework participation and evaluate performance; determine equipment needs; and ensure all the applicable statutory, regulatory and policy requirements are met and appropriate safeguards are in place to protect government information.  
**DISCLOSURE:** Voluntary; however, failure to provide the requested information may result in employee ineligibility to participate in the telework program.

If you are initiating this form on the behalf of someone else, a form with your information titled **Assistant Information** will be shown. This is automatically populated with your e-mail and name. You will then complete the form following the instructions below for an employee.

Are you initiating this form on the behalf of someone else?\*

**Assistant Information**

Email*	First Name*	M.I.	Last Name*
joy_buhler@ios.doi.gov	Joy		Buhler

Complete all mandatory fields for the **Employee** section of the form. The employee is responsible for reviewing the Privacy Act Statement and completing all the required fields

including e-mail, Name, Phone, Title, Grade, Bureau/Agency, and Supervisor's E-mail. Some fields have "help" or "expansion" buttons to provide you with additional information and assist you in completing the form.

**Form Instructions**

**PRIVACY ACT STATEMENT**

**AUTHORITY:** 5 USC 301 and 5 USC Part III, Subpart E, Chapter 65.  
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**DISCLOSURE:** Voluntary; however, failure to provide the requested information may result in employee ineligibility to participate in the telework program.

**Employee**

Email*	First Name*	M.I.	Last Name*	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	02/04/2015
Phone*	Title*			Grade*
<input type="text"/>	<input type="text"/>			<input type="text"/>
Bureau/Agency*				Supervisor's Email*
<input type="text"/>				<input type="text"/>

The Telework Type field in the Telework Specifics section is a drop-down menu. This menu uses the three definitions of Telework that can be found in the Telework Handbook. The three types of telework are: core, situational, and emergency. If you are unfamiliar with the Types of Telework, you can find the definitions [here](#).

**Teleworking Specifics**

Telework Type\*

Telework Type\*

- Core
- Situational
- Emergency

Primary Telework Location

If you select Core in the Telework Form, the screen below will appear and you can indicate the days per period you wish to telework. Both weeks of the pay period are shown here. The screen below does not appear for Situational or Emergency Teleworkers.

**Teleworking Specifics**

Telework Type\*  
Core

Please indicate the days per pay period you wish to telework (must select at least one).

	Select All	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1	<input type="checkbox"/>							
Week 2	<input type="checkbox"/>							

Situational, Emergency, and Core Teleworkers will be asked to fill out the screen below. If you plan on teleworking at more than one alternate location, you click on the button below and additional telework location fields will appear.

**Teleworking Specifics**

Telework Type\*  
Situational

Primary Telework Location

Address 1\*

Address 2

City\*

State/Territory\*

Zip\*

Phone\*

Fax

Alternate Telework Location

Address 1

Address 2

City

State/Territory

Zip

Phone

Fax

Check here to add an alternate telework location.

Once you fill out the form, a box will appear that allows the employee to opt out of the telework agreement. If the box is checked and the submit button is selected, an e-mail will go to the employee and supervisor indicating the employee chose to elect out of the telework agreement.

I, Joy Buhler, elect to opt out of this Telework Agreement.

**Submit** When you have completed this form, click the 'Submit Now' button to submit the form for processing. You will then be provided with further instructions should you have to provide supporting documentation.

**Save Online** To save a partially completed form for completion at a later date, click the 'Save Online' button. You can then log on to the EFS Portal with your username and password at any time to complete this transaction.

If you need to save the form and go back to it at a later time, click on the **Save Online** button. To return to a saved form, go to your Task List in the main eForm menu, find the form, and click **Open Form** to resume completion.

**Submit**

**Save Online**

When you have completed this form, click the 'Submit Now' button to submit the form for processing. You will then be provided with further instructions should you have to provide supporting documentation.

To save a partially completed form for completion at a later date, click the 'Save Online' button. You can then log on to the EFS Portal with your username and password at any time to complete this transaction.

If you Save the form Online, you can go to the Task List page to resume and complete the form at any time.

**Task List**

Complete your outstanding forms and tasks.

search  Filter:

**Complete your saved DI-3457: Telework Agreement**

Saved At: 10 Feb 2015 10:08 AM

**Assigned Task - DI-3457: Telework Agreement by Yasi Abernathy requires action by you**

Assigned To: jmbuhler@ios.doi.gov Created: 6 Feb 2015 3:41 PM

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Once you click Submit, the screen below will appear and a notification is sent via e-mail to your supervisor that the telework agreement is ready for review and approval.

**DI-3457: Telework Agreement**

**Thank you**  
Your form has been submitted for processing.

Reference Number: **DI-3457-574**  
(This number can be used to help track your form's progress)

Completed: 3:35 PM, Friday 6 February 2015

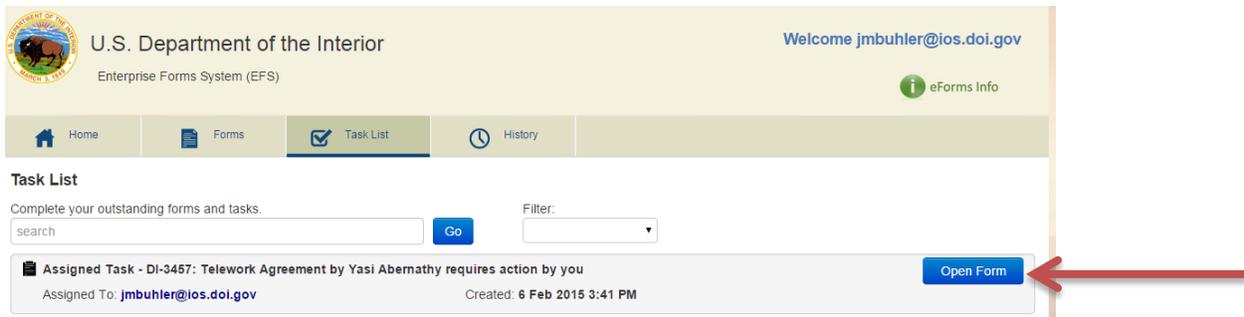
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## Supervisor Walk-Through

The Supervisor will receive an e-mail below from their employee. The supervisor can click on the hyperlink that states “click here” and will be sent to the Task List Section of the EFS system.



In the Task List section, pending telework agreements by employees assigned to you can be found here. Click the Open Form Button.



You will be asked to accept the Terms and Conditions. By accepting, you are certifying that you have read [the DOI Handbook](#), finished the [safety check-list](#), reviewed the [Telework Agreement walk-through](#), and the supervisor and employee have both completed the required training on [DOI Learn](#).

## DI-3457: Telework Agreement

### Terms and Conditions

Before viewing the DI-3457: Telework Agreement form, you must have read the U.S. Department of the Interior's Telework Handbook (370 DM 226) that establishes Department-wide policies and procedures for the proper implementation of all Federal laws, Executive Orders, regulations, and policies related to telework. You should have also completed the Safety Check-list, reviewed the Telework Form walk-through, and finished the required training. In addition, by accepting these Terms and Conditions, you agree and are bound to applicable Bureau and Department-wide policies and procedures.

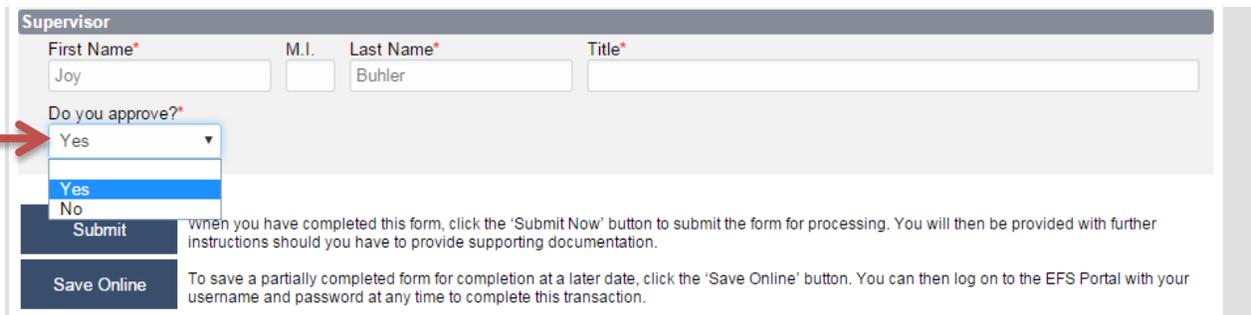
Accept 

By clicking the "Accept" button, you agree to be bound by the Terms and Conditions.



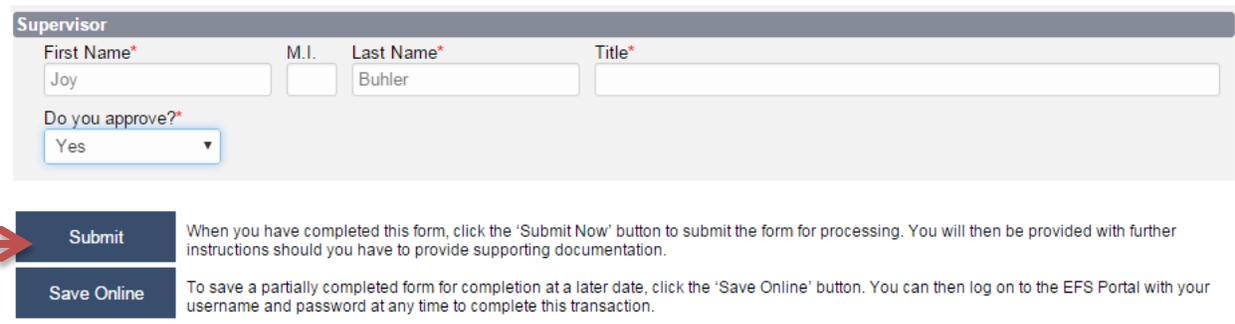
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The supervisor reviews the telework agreement and clicks **Yes** or **No** for approval.



The form is titled "Supervisor" and contains the following fields: "First Name\*" (Joy), "M.I." (empty), "Last Name\*" (Buhler), and "Title\*" (empty). Below these is a "Do you approve?\*" dropdown menu with "Yes" selected. At the bottom are "Submit" and "Save Online" buttons. A red arrow points to the "Yes" option in the dropdown menu.

If you select **Yes** to approve, click the submit button. A .pdf format of the Telework Agreement will be sent to you and your employee via e-mail.



The form is identical to the previous one, but the "Do you approve?\*" dropdown menu is now closed and shows "Yes". A red arrow points to the "Submit" button.

If you select No, a field pops up with a drop down menu that asks if you want to allow for revision. You may select Yes or No.

I, Yasi Abernathy, elect to opt out of this Telework Agreement.

**Supervisor**

First Name\* Joy M.I. Last Name\* Buhler Title\*

Do you approve?\* No Do you want to allow for revision?\*  
Yes  
No

**Submit** When you have completed this form, click the "Submit Now" button to submit the form for processing. You will then be provided with further instructions should you have to provide supporting documentation.

**Save Online** To save a partially completed form for completion at a later date, click the "Save Online" button. You can then log on to the EFS Portal with your username and password at any time to complete this transaction.

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If you want to allow for revision, a drop-down screen that states “please see supervisor” is shown. An e-mail will be sent to the employee to contact their supervisor.

**Supervisor**

First Name\* Joy M.I. Last Name\* Buhler Title\*

Do you approve?\* No Do you want to allow for revision?\* Yes

Comment\*  
Please see supervisor

**Submit** When you have completed this form, click the "Submit Now" button to submit the form for processing. You will then be provided with further instructions should you have to provide supporting documentation.

**Save Online** To save a partially completed form for completion at a later date, click the "Save Online" button. You can then log on to the EFS Portal with your username and password at any time to complete this transaction.

If you do not want an employee to telework, click **No** for revision and select one of the drop-down boxes. You may select **Employee not Eligible, See 5 USC 6502 and all Subparts**, or **Position not Eligible**.

Yasi Abernathy, elect to opt out of this Telework Agreement.

**Supervisor**

First Name\* M.I. Last Name\* Title\*

Joy [ ] Buhler [ ] [ ] [ ]

Do you approve?\* Do you want to allow for revision?\*

No [v] No [v]

Comment\*

- Employee not eligible
- See 5 USC 6502(2) and all subparts
- Position not eligible

Save Online To save a partially completed form for completion at a later date, click the 'Save Online' button. You can then log on to the EFS Portal with your username and password at any time to complete this transaction.

Submit Now To save a partially completed form for completion at a later date, click the 'Submit Now' button to submit the form for processing. You will then be provided with further instructions should you have to provide supporting documentation.

If you Save Online, you can go to the Task List page to resume and complete the form at any time.

Home Forms Task List History

**Task List**

Complete your outstanding forms and tasks.

search [ ] Go [ ] Filter: [v]

- Complete your saved DI-3457: Telework Agreement  
Saved At: 10 Feb 2015 10:08 AM  
Open Form [ ] Delete [ ]
- Assigned Task - DI-3457: Telework Agreement by Yasi Abernathy requires action by you  
Assigned To: jmbuhler@ios.doi.gov Created: 6 Feb 2015 3:41 PM  
Open Form [ ]

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If you are ready to approve the Telework Agreement, you may select the submit button, and a .pdf of the telework agreement will be sent to you and your employee via e-mail.

Submit When you have completed this form, click the 'Submit Now' button to submit the form for processing. You will then be provided with further instructions should you have to provide supporting documentation.

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