

This form lists areas and items the employee should inspect before remote working begins to ensure the designated off-site workspace is safe, ergonomically suitable, and free from hazards. Employees and supervisors/managers may add to this list as needed. Each department has a safety coordinator who may have additional resources regarding working safely.

Name of Employee: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell/Other Phone: \_\_\_\_\_  
 Department: \_\_\_\_\_ Department Location: \_\_\_\_\_  
 Supervisor: \_\_\_\_\_ Work Phone: \_\_\_\_\_

The following checklist is designed to assess the overall safety of the alternative work location. Employees are encouraged to read and complete the self-certification safety checklist. Upon completion, the checklist should be signed and dated by the employee and returned to the supervisor.

The alternative work location address is:  
 \_\_\_\_\_

Briefly describe the designated work area:  
 \_\_\_\_\_  
 \_\_\_\_\_

**A. General Safety**

1. Is the workstation arranged to be comfortable without unnecessary strain on backs, arms, necks, etc.? For more information, consult Environmental Health & Safety at: <http://ehs.virginia.edu/home.html>
2. Are heating, ventilation and air conditioning systems adequate for assigned tasks and in good repair?
3. Is the lighting adequate for assigned tasks?
4. Are cabinets, shelves or furniture greater than five feet high secured to prevent toppling during an earthquake?
5. Are books and supplies stored to prevent falling during an earthquake?
6. Are wheels on rolling files or other mobile equipment free from binding when rolled?  
Can they also be locked to prevent rolling?
7. Are cords, cables or other items arranged to prevent a tripping hazard?

**B. Fire Safety**

1. Are fire exits clearly defined and unobstructed?
2. Is there a charged and accessible dry chemical fire extinguisher?
3. Is there a working smoke detector covering the designated workspace?
4. Is the workspace kept clean from trash or other combustible materials?

**C. Electrical Safety**

1. Are all electrical plugs, cords, panels and receptacles in good condition and free of exposed conductors or broken insulation?
2. Are circuit breakers or fuse panels properly labeled and accessible?
3. Are three-wire grounded outlets or circuit breaker power strips used?  
**Note:** Older homes with two-wire grounded outlets that require plug adapters will not afford adequate protection for personal computers.
4. Is there sufficient ventilation for electrical components?

**D. Other Safety Items (please list)**

- 1.
- 2.
- 3.

The employee will designate a workspace as the home office and will maintain this workspace in a safe condition, free from hazards and other dangers to people and equipment. Issues related to individual tax deductions for the designated workspace in the employee's home shall be the responsibility of the employee.

The University may be liable for job-related illnesses that occur during established work hours in alternative work locations; however the home office shall not be considered an extension of the University work site. The employee remains liable for injuries to third parties and/or members of the employee's family on the employee's premises.