

## Telecommuting Program Biweekly Progress Report

Period Covered: \_\_\_\_\_

To (immediate supervisor): \_\_\_\_\_

Submitted by (employee): \_\_\_\_\_ Date: \_\_\_\_\_

Project/Job Function	Work performed/completed related to project/function	Project status
1.		
2.		
3.		
4.		

Project/Job Function	Work performed/completed related to project/function	Project status
5.		
6.		
7.		
8.		
9.		