

Appendix D

**Wisconsin National Guard Telework Summary Report**

**For the Month of:**

*Functional Area:*

*Telework Coordinator Name:*

Email Address:

*Phone Number:*

*Using the table below, specify the total number of teleworkers by the indicated categories:*

<b><i>Participation Rate</i></b>	<b><i>Federal (NDS) Non-Dual Status</i></b>	<b><i>Federal (DS) Dual Status</i></b>	<b><i>AGR</i></b>	<b><i>Notes</i></b>
<b>1 day per pay period</b>				
<b>More than 1 day per pay period</b>				
<b>Ad hoc (i.e., Occasional Project)</b>				