**OCCUPATIONAL SAFETY DECLARATION, RISK ASSESSMENT**

Name of the employee working from home (home office):

Job title:

Date of asking for permission (day, month, year):

Address of working from home:

Room in which the work is to be carried out:

Name of the person authorizing the home office:

Title:

Date of permission (day, month, year):

Date of suspension/authorization withdrawal:

**Please fill in the following form!**

The chart summarizes the general minimum requirements for workplaces, which must also be respected when working from home:

|  | **Question** | **Yes/No** | **Note** |
| --- | --- | --- | --- |
| 1. | Is the working environment free of hazards, slips, trips and obstacles, is safe movement ensured? |  |  |
| 2. | Are the electrical cables properly placed and not obstructing? |  |  |
| 3. | Are there no loops or breaks in the cable routing, are the cables and connectors undamaged and safe? |  |  |
| 4. | Is the furniture in the room at which the work is carried out in good condition and safe to use? |  |  |
| 5. | Do the ergonomic conditions in the environment used as a workstation exist? |  |  |
| 6. | Is the ventilation in the property adequate? Are hazardous substances and mixtures prevented from entering the air? |  |  |
| 7. | Is the window shading adequate? (Do the windows have curtains, blinds, shutters, reluxes, etc.) |  |  |
| 8. | Do you have air conditioning in the area of your home office? |  |  |
| 9. | Is the electrical protection of work equipment, sockets, extension cords adequate? |  |  |
| 10. | Is there a shock protection safety system in the working environment used as a home office (e.g.: fi-relay/touch protection relay, etc.) |  |  |
| 11. | Are the electrical sockets in good condition (not torn, broken, damaged, earthed, etc.)? |  |  |
| 12. | Are the electrical switches in good condition (not torn, broken, etc.)? |  |  |
| 13. | Is the work surface or screen glare-free? |  |  |
| 14. | In case of fire or other emergency, is safe evacuation of the building ensured? |  |  |
| 15. | Is internet connection available? Bandwidth? |  |  |

**Smoking is prohibited in the designated work area during the work period!**

If the employee moves to a new place of residence, which entails a change of address, and if the working conditions in the premises designated for the home office change to an extent that contradicts the answers given above, he/she must inform his/her employer and then provide a new declaration for the new place/premises.

The employee is obliged to give a truthful and accurate answer to the above questions. The employee may only carry out remote work if his/her answers to the questions above have been assessed and, on the basis of these, he/she has been given permission to do so. The employer or its agent shall not be responsible for assessing the truth behind the answers given to the questions.

The employer is only responsible for the maintenance and technical condition of the work equipment provided by it.

The employer or its representative (e.g. a work safety representative) may inspect the employee at the place where the remote working is declared, during the specified regular working hours, on the basis of a prior agreement (verbal or written). On the basis of the results of the inspection, the remote working may be suspended (in the case of shortcomings, until they are remedied).

The competent regional authority for occupational safety and health may carry out inspections at the place where remote working is carried out. Both the worker and the employer must be informed of the inspection in advance.

**I, the undersigned ............................................., as an employee of the University of Miskolc, confirm that my answers and comments to the above questions are true and correct to the best of my knowledge.**

MISKOLC, …………………………2022.

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Employee Employer