



Personal Protective Equipment Checklist

Print Form

Risk Management
 Mat-Su Borough School District
 501 North Gulkana
 Palmer, Alaska 99645
 P: (907) 746-9213 || F: (907) 761-4091

Special Instructions: The department supervisor is responsible for reviewing each position and also for ensuring the appropriate Personal Protective Equipment (PPE) is available to staff members.

Department: Date:

Supervisor:

Position Being Reviewed:

Protection	PPE for Workers Checklist	Applicable	
EYE 	Sawing, cutting, drilling, sanding, grinding, hammering, chopping, abrasive blasting, punch press operations, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Pouring, mixing, painting, cleaning, siphoning, dip tank operations, dental or health care services, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Battery charging, installing fiberglass insulation, compressed air or gas operations, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Welding, cutting, laser operations, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
FACE 	Pouring, mixing, painting, cleaning, siphoning, dip tank operations, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Welding, pouring molten metal, smithing, baking, cooking, drying, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Cutting, sanding, grinding, hammering, chopping, pouring, mixing, painting, cleaning, siphoning, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
HEAD 	Work stations or traffic routes located under catwalks or conveyor belts, construction, trenching, utility work etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Construction, confined space operations, building maintenance, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Building maintenance; utility work; construction; wiring; work on or near communications, computer, or other high tech equipment; arc or resistance welding; etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
FEET 	Construction, plumbing, smithing, building maintenance, trenching, utility work, grass cutting etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Building maintenance; utility work; construction; wiring; work on or near communications, computer, or other high tech equipment; arc or resistance welding; etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Welding, foundry work, casting, smithing, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Demolition, explosives manufacturing, spray painting, abrasive blasting, work with highly flammable materials, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Hands 	Grinding, sanding, sawing, hammering, material handling, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Pouring, mixing, painting, cleaning, siphoning, dip tank operations, health care, and dental services, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Welding, pouring molten metal, smithing, baking, cooking, drying, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Building maintenance; utility work; construction, wiring, work on or near communications, computer, or other high tech equipment; arc or resistance welding; etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No



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BODY 	Pouring, mixing, painting, cleaning, siphoning, dip tank operations, machining, sawing, battery charging, installing fiberglass insulation, compressed air or gas operations, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Cutting, grinding, sanding, sawing, glazing, material handling, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Welding, pouring molten metal, smithing, baking, cooking, drying, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Pouring, mixing, painting, cleaning, siphoning, dip tank operations, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
HEARING 	Machining, grinding, sanding, work near conveyors, pneumatic equipment, generators, ventilation fans, motors, punch and brake presses, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
ADDITIONAL REQUIRED PPE		<input type="checkbox"/> Yes	<input type="checkbox"/> No
NOTES			

The department supervisor is responsible for reviewing each position and also for ensuring the appropriate Personal Protective Equipment (PPE) is available to staff members. I verified that the appropriate PPE is available. If the PPE is not available contact your department Director.

_____ Printed Name & Signature Date