

Personal Protective Equipment Checklist (once per week)

Print Name:	Month/Year
Department Area:	CUID:

	Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail
Date:										
FOOTWEAR	Week 1 (2 points)		Week 2 (2 points)		Week 3 (2 points)		Week 4 (2 points)		Week 5 (2 points)	
Evaluation of fit										
Rips, tears, and cuts										
Closure system damage										
Damage or deformed steel toe										
Seam integrity and condition of liner										
Heel and excessive tread wear										
Condition of lining										
GLOVES										
Evaluation of fit										
Soiling										
Contamination from hazardous material										
Rips, tears, cuts or thermal damage										
Inverted liner										
Shrinkage										
Loss of elasticity and flexibility										
SAFETY GLASSES										
Cleaning (dirty, dusty or broken)										
Handling and storage										
Scratches										
EAR PLUGS										
Cleaning (dirty, dusty or broken)										
Handling and storage										
DUST MASK										
Cleaning (dirty, dusty or broken)										
Handling and storage										

Safety Team Member: _____ Total Points: _____ Scan Monthly