## Appendix B - 2 EMPLOYEE PERSONAL PROTECTIVE EQUIPMENT CHECKLIST

		EMPLOYEE PERSONAL PROTECTIVE EQUIPMENT CHECKLIST																		
Name			Parish/School/Archdiocese of Employment & City															_		
Date of Hire			Position or Job Title																	
I acknowledge receiving the following checklist and PPE:					Eı	mployee	e's Sign	ature			Date									
Note: This form is to be filed in the Employee's personne			Supervisor Date file																	
Check if not applicable	Job Task	CORE	Insul, face ships	Non-insulated Glod	Nitrile Rich Globes	les les los	Strer Glo	Sel Toe SI	N. Hard	Resolition Dust No.	ato, Jak	tar Me	Carpy	mex	Cover	Seffective Lalls	Reine	Velding Shi	Melding in the last of the las	Rody
	Indoor Cleaning	1	2	2		2	1	2												
	Outdoor Cleaning	1	2	2		2	1	2					2	2		2		2		
	Spill clean up	1	2	2			1													
	Solid Waste Disposal	1				2	1	2							2					
	Sweeping the Street	1	2	2		2		2			1		2	2		2	1	2		
	Snow Removal				1								2	2			2			
	Hand held circular saw	1						1					2	2						
	Boiler or Equipment Inspection	1			2	1	2								2	2				
	Grinding	1	2	2		1		2			1		2	2		2				
	Welding							1											1	1
	Hoisting							1												
	Drill Press or table saw	1																		
	Lawn or Grounds Maintenance	1	2	2		1		1	2	2	2		2	2		2		2		
	Vehicle Maintenance	1				2	1	2								2				
	Note: 1 - PPE must be used.		•		•		•	•												
Note: 2 - PPE choice is based on situation.																				