Personnel Questionnaire
Risks / Hazards

Name: Jonathan Connor
Date: 17/8/10.

		RISK?		LEVEL of RISK		
Personal & Personal Working Area	**Y/N**	**Yes**	**No**	**Low**	**Medium**	**High**
Is the work area clean and tidy?	Y		✓			
Is there sufficient lighting?	Y		✓			
Is the temperature comfortable?	Y		✓			
Is there adequate heating & ventilation in the working area?	Y		✓			
Is the area around the workstation / workbench clear of any obstructions?	Y		✓			
Are walkways clear of obstructions?	N	✓			✓	
Are items stacked on shelving properly?	Y		✓			
Is the flooring: slippery, uneven, sloped or have holes?	N		✓			
Is there any loose or ripped carpeting?	N		✓			
Are radiators clear of anything combustible?	Y		✓			
Do any cables or wires run across the floor?	N		✓			
Are all electrical cables in good condition?	Y		✓			
Is there space within and around the workstation / workbench to work?	Y		✓			
Are there any sources of distracting noise?	N		✓			
Are there any problems with static electricity?	N		✓			
Is there a Fire extinguisher in the working area?	N		✓	Down corridor		
Have you been trained in the use of Fire extinguishers and fire prevention techniques?	N		✓			
Do you know what to do in the event of a fire?	Y		✓			
Are you aware of the fire assembly point?	Y		✓			
Do you know what & where the fire alarm is?	Y		✓			
Is protective clothing and equipment provided?	N/A					
Is it effective?	N/A					
Do you have a pre-existing medical condition or health problem?	N		✓			
Are you pregnant?	N		✓			

Personnel Questionnaire
Risks / Hazards

Name: Jonathan Connor
Date: 17/8/10.

		RISK?		LEVEL of RISK		
	Y/N	Yes	No	Low	Med	High
Does the task involve holding a load away from your body?	Y		✓			
Does the task involve reaching upwards?	Y		✓			
Does the task involve strenuous pushing or pulling?	N		✓			
Does the task involve moving or carrying a load over a long distance?	N		✓			
Does the task involve excessive or continuous lifting?	N		✓			
Does the task involve stooping to lift or lower the load?	Y		✓			
Does the task involve twisting the trunk?	Y		✓			
Does the task involve repetitive or prolonged handling?	N		✓			
Does the task involve unusual strength or height?	N		✓			
Does the task involve sudden / unpredictable movements?	N		✓			
Are there others to assist with lifting?	Y		✓			
Are packages heavy?	Y		✓			
Are packages bulky?	Y		✓			
Are packages difficult to hold?	N		✓			
Are packages unstable?	N		✓			
Do packages have contents that are sharp?	N		✓			
Do packages have contents that are awkward in size?	N		✓			
Do packages have contents that are potentially dangerous?	N		✓			
Do packages have contents that are likely to move?	N		✓			
Do packages have Hazardous substances present?	N		✓			

Personnel Questionnaire
Risks / Hazards

Name: Jonathan Conner
Date: 17/8/10

		RISK?		LEVEL of RISK		
Workstations	**Y/N**	**Yes**	**No**	**Low**	**Medium**	**High**
Have you been trained on good ergonomic practices?	Y		✓			
Have you been given all available information on the use of display screen equipment?	Y		✓			
Is there a system for users to report faults relating to display screen work?	Y		✓			
Are you taking appropriate breaks from display screen work?	Y		✓			
Is your chair in good working condition and adjustable?	Y		✓			
Do you sit correctly in the chair?	N		✓			
Can you place both feet flat on the floor?	Y		✓			
If not, is a footrest provided?	N/A					
Is your chair adjusted to the proper height for your display screen?	Y		✓			
Is the desk high enough for use with display screen equipment?	Y		✓			
Is the screen free from glare and reflections?	Y		✓			
If not, is a screen filter provided?	N/A					
Can you work comfortably at your workstation?	Y		✓			

Personnel Questionnaire
Risks / Hazards

Name: Ryan Swaine
Date: 17/8/10

		RISK?		LEVEL of RISK		
Personal & Personal Working Area	**Y/N**	**Yes**	**No**	**Low**	**Medium**	**High**
Is the work area clean and tidy?	Y					
Is there sufficient lighting?	Y					
Is the temperature comfortable?	Y					
Is there adequate heating & ventilation in the working area?	Y					
Is the area around the workstation / workbench clear of any obstructions?	Y					
Are walkways clear of obstructions?	Y					
Are items stacked on shelving properly?	Y					
Is the flooring: slippery, uneven, sloped or have holes?	N					
Is there any loose or ripped carpeting?	N					
Are radiators clear of anything combustible?	Y					
Do any cables or wires run across the floor?	N					
Are all electrical cables in good condition?	Y					
Is there space within and around the workstation / workbench to work?	Y					
Are there any sources of distracting noise?	N					
Are there any problems with static electricity?	N					
Is there a Fire extinguisher in the working area?	Y					
Have you been trained in the use of Fire extinguishers and fire prevention techniques?	Y					
Do you know what to do in the event of a fire?	Y					
Are you aware of the fire assembly point?	Y					
Do you know what & where the fire alarm is?	Y					
Is protective clothing and equipment provided?	Y					
Is it effective?	Y					
Do you have a pre-existing medical condition or health problem?	N					
Are you pregnant?	N					

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
Does the task involve holding a load away from your body?	N					
Does the task involve reaching upwards?	N					
Does the task involve strenuous pushing or pulling?	N					
Does the task involve moving or carrying a load over a long distance?	N					
Does the task involve excessive or continuous lifting?	N					
Does the task involve stooping to lift or lower the load?	N					
Does the task involve twisting the trunk?	N					
Does the task involve repetitive or prolonged handling?	N					
Does the task involve unusual strength or height?	N					
Does the task involve sudden / unpredictable movements?	N					
Are there others to assist with lifting?	Y					
Are packages heavy?	N					
Are packages bulky?	N					
Are packages difficult to hold?	N					
Are packages unstable?	N					
Do packages have contents that are sharp?	N					
Do packages have contents that are awkward in size?	N					
Do packages have contents that are potentially dangerous?	N					
Do packages have contents that are likely to move?	N					
Do packages have Hazardous substances present?	N					

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
Workstations	**Y/N**	**Yes**	**No**	**Low**	**Medium**	**High**
Have you been trained on good ergonomic practices?	Y					
Have you been given all available information on the use of display screen equipment?	Y					
Is there a system for users to report faults relating to display screen work?	Y					
Are you taking appropriate breaks from display screen work?	Y					
Is your chair in good working condition and adjustable?	Y					
Do you sit correctly in the chair?	Y					
Can you place both feet flat on the floor?	Y					
If not, is a footrest provided?	Y					
Is your chair adjusted to the proper height for your display screen?	Y					
Is the desk high enough for use with display screen equipment?	Y					
Is the screen free from glare and reflections?	Y					
If not, is a screen filter provided?	Y					
Can you work comfortably at your workstation?	Y					

Personnel Questionnaire
Risks / Hazards

Name: STEVE HARDAKER
Date: 16/8/10

Personal & Personal Working Area	Y/N	RISK? Yes	RISK? No	LEVEL of RISK Low	LEVEL of RISK Medium	LEVEL of RISK High
Is the work area clean and tidy?	Y		✓			
Is there sufficient lighting?	Y		✓			
Is the temperature comfortable?	Y		✓			
Is there adequate heating & ventilation in the working area?	Y		✓			
Is the area around the workstation / workbench clear of any obstructions?	Y		✓			
Are walkways clear of obstructions?	Y		✓			
Are items stacked on shelving properly?	Y		✓			
Is the flooring: slippery, uneven, sloped or have holes?	N		✓			
Is there any loose or ripped carpeting?	N		✓			
Are radiators clear of anything combustible?	Y		✓			
Do any cables or wires run across the floor?	N		✓			
Are all electrical cables in good condition?	Y		✓			
Is there space within and around the workstation / workbench to work?	Y		✓			
Are there any sources of distracting noise?	N		✓			
Are there any problems with static electricity?	N		✓			
Is there a Fire extinguisher in the working area?	Y		✓			
Have you been trained in the use of Fire extinguishers and fire prevention techniques?	N		✓			
Do you know what to do in the event of a fire?	Y		✓			
Are you aware of the fire assembly point?	Y		✓			
Do you know what & where the fire alarm is?	Y		✓			
Is protective clothing and equipment provided?	N		✓			
Is it effective?	N/A		✓			
Do you have a pre-existing medical condition or health problem?	N		✓			
Are you pregnant?	N		✓			

Personnel Questionnaire
Risks / Hazards

Name: STEVE HARDAKER
Date: 16/8/10

	RISK?		LEVEL of RISK			
Does the task involve holding a load away from your body?	N		/			
Does the task involve reaching upwards?	N		/			
Does the task involve strenuous pushing or pulling?	N		/			
Does the task involve moving or carrying a load over a long distance?	N		/			
Does the task involve excessive or continuous lifting?	N		/			
Does the task involve stooping to lift or lower the load?	N		/			
Does the task involve twisting the trunk?	N		/			
Does the task involve repetitive or prolonged handling?	N		/			
Does the task involve unusual strength or height?	N		/			
Does the task involve sudden / unpredictable movements?	N		/			
Are there others to assist with lifting?	Y		/			
Are packages heavy?	N		/			
Are packages bulky?	N		/			
Are packages difficult to hold?	N		/			
Are packages unstable?	N		/			
Do packages have contents that are sharp?	N		/			
Do packages have contents that are awkward in size?	N		/			
Do packages have contents that are potentially dangerous?	N		/			
Do packages have contents that are likely to move?	N		/			
Do packages have Hazardous substances present?	N		/			

Personnel Questionnaire
Risks / Hazards

Name: STEVE HARDAKER
Date: 16/8/10

		RISK?		LEVEL of RISK		
Workstations	**Y/N**	**Yes**	**No**	**Low**	**Medium**	**High**
Have you been trained on good ergonomic practices?	Y		✓			
Have you been given all available information on the use of display screen equipment?	Y		✓			
Is there a system for users to report faults relating to display screen work?	Y		✓			
Are you taking appropriate breaks from display screen work?	Y		✓			
Is your chair in good working condition and adjustable?	Y		✓			
Do you sit correctly in the chair?	Y		✓			
Can you place both feet flat on the floor?	Y		✓			
If not, is a footrest provided?	N/A		✓			
Is your chair adjusted to the proper height for your display screen?	Y		✓			
Is the desk high enough for use with display screen equipment?	Y		✓			
Is the screen free from glare and reflections?	Y		✓			
If not, is a screen filter provided?	N/A		✓			
Can you work comfortably at your workstation?	Y		✓			

Personnel Questionnaire
Risks / Hazards

Name: Helen Lamb
Date: 16-8-10

Personal & Personal Working Area	Y/N	RISK? Yes	RISK? No	LEVEL of RISK Low	LEVEL of RISK Medium	LEVEL of RISK High
Is the work area clean and tidy?		✓				
Is there sufficient lighting?		✓				
Is the temperature comfortable?		✓				
Is there adequate heating & ventilation in the working area?		✓				
Is the area around the workstation / workbench clear of any obstructions?		✓				
Are walkways clear of obstructions?		✓				
Are items stacked on shelving properly?		✓				
Is the flooring: slippery, uneven, sloped or have holes?			✓			
Is there any loose or ripped carpeting?			✓			
Are radiators clear of anything combustible?		✓				
Do any cables or wires run across the floor?			✓			
Are all electrical cables in good condition?		✓				
Is there space within and around the workstation / workbench to work?		✓				
Are there any sources of distracting noise?			✓			
Are there any problems with static electricity?			✓			
Is there a Fire extinguisher in the working area?		✓				
Have you been trained in the use of Fire extinguishers and fire prevention techniques?			✓	✓		
Do you know what to do in the event of a fire?		✓				
Are you aware of the fire assembly point?		✓				
Do you know what & where the fire alarm is? ?		✓				
Is protective clothing and equipment provided?			✓			
Is it effective?			✓			
Do you have a pre-existing medical condition or health problem?		✓		✓		
Are you pregnant?			✓			

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
Does the task involve holding a load away from your body?			✓			
Does the task involve reaching upwards?			✓			
Does the task involve strenuous pushing or pulling?			✓			
Does the task involve moving or carrying a load over a long distance?			✓			
Does the task involve excessive or continuous lifting?			✓			
Does the task involve stooping to lift or lower the load?			✓			
Does the task involve twisting the trunk?			✓			
Does the task involve repetitive or prolonged handling?			✓			
Does the task involve unusual strength or height?			✓			
Does the task involve sudden / unpredictable movements?			✓			
Are there others to assist with lifting?		✓		✓		
Are packages heavy?		✓	✓	✓		
Are packages bulky?		✓		✓		
Are packages difficult to hold?		✓		✓		
Are packages unstable?			✓			
Do packages have contents that are sharp?		✓				
Do packages have contents that are awkward in size?			✓			
Do packages have contents that are potentially dangerous?			✓			
Do packages have contents that are likely to move?		✓		✓		
Do packages have Hazardous substances present?						

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
Workstations	**Y/N**	**Yes**	**No**	**Low**	**Medium**	**High**
Have you been trained on good ergonomic practices?		✓				
Have you been given all available information on the use of display screen equipment?		✓				
Is there a system for users to report faults relating to display screen work?		✓				
Are you taking appropriate breaks from display screen work?		✓				
Is your chair in good working condition and adjustable?		✓				
Do you sit correctly in the chair?		✓				
Can you place both feet flat on the floor?		✓				
If not, is a footrest provided?						
Is your chair adjusted to the proper height for your display screen?		✓				
Is the desk high enough for use with display screen equipment?		✓				
Is the screen free from glare and reflections?		✓				
If not, is a screen filter provided?						
Can you work comfortably at your workstation?		✓				

Personnel Questionnaire
Risks / Hazards

Name: Rose Barlow
Date: 17/8/10

		RISK?		**LEVEL of RISK**		
Personal & Personal Working Area	**Y/N**	**Yes**	**No**	**Low**	**Medium**	**High**
Is the work area clean and tidy?		✓		✓		
Is there sufficient lighting?		✓		✓		
Is the temperature comfortable?	✓			✓		
Is there adequate heating & ventilation in the working area?	✓			✓		
Is the area around the workstation / workbench clear of any obstructions?		✓		✓		
Are walkways clear of obstructions?		✓		✓		
Are items stacked on shelving properly?		✓		✓		
Is the flooring: slippery, uneven, sloped or have holes?		✓		✓		
Is there any loose or ripped carpeting?		✓		✓		
Are radiators clear of anything combustible?		✓		✓		
Do any cables or wires run across the floor?			✓	✓		
Are all electrical cables in good condition?		✓		✓		
Is there space within and around the workstation / workbench to work?		✓		✓		
Are there any sources of distracting noise?			✓	✓		
Are there any problems with static electricity?			✓	✓		
Is there a Fire extinguisher in the working area?		✓		✓		
Have you been trained in the use of Fire extinguishers and fire prevention techniques?			✓	✓		
Do you know what to do in the event of a fire?		✓		✓		
Are you aware of the fire assembly point?		✓		✓		
Do you know what & where the fire alarm is?		✓		✓		
Is protective clothing and equipment provided?		✓		✓		
Is it effective?		✓		✓		
Do you have a pre-existing medical condition or health problem?		✓		✓		
Are you pregnant?			✓			

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
Does the task involve holding a load away from your body?						
Does the task involve reaching upwards?						
Does the task involve strenuous pushing or pulling?						
Does the task involve moving or carrying a load over a long distance?						
Does the task involve excessive or continuous lifting?						
Does the task involve stooping to lift or lower the load?						
Does the task involve twisting the trunk?						
Does the task involve repetitive or prolonged handling?						
Does the task involve unusual strength or height?						
Does the task involve sudden / unpredictable movements?						
Are there others to assist with lifting?						
Are packages heavy?						
Are packages bulky?						
Are packages difficult to hold?						
Are packages unstable?						
Do packages have contents that are sharp?						
Do packages have contents that are awkward in size?						
Do packages have contents that are potentially dangerous?						
Do packages have contents that are likely to move?						
Do packages have Hazardous substances present?						

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
Workstations	**Y/N**	**Yes**	**No**	**Low**	**Medium**	**High**
Have you been trained on good ergonomic practices?						
Have you been given all available information on the use of display screen equipment?		✓		✓		
Is there a system for users to report faults relating to display screen work?		✓		✓		
Are you taking appropriate breaks from display screen work?		✓				
Is your chair in good working condition and adjustable?		✓		✓		
Do you sit correctly in the chair?			✓			
Can you place both feet flat on the floor?		✓		✓		
If not, is a footrest provided?						
Is your chair adjusted to the proper height for your display screen?		✓		✓		
Is the desk high enough for use with display screen equipment?		✓		✓		
Is the screen free from glare and reflections?		✓		✓		
If not, is a screen filter provided?						
Can you work comfortably at your workstation?		✓		✓		

Personnel Questionnaire
Risks / Hazards

Name: Linda Shearing
Date: 15.8.10

Personal & Personal Working Area	Y/N	RISK? Yes	RISK? No	LEVEL of RISK Low	Medium	High
Is the work area clean and tidy?	Y	✓		✓		
Is there sufficient lighting?	Y	✓				
Is the temperature comfortable?	Y	✓				
Is there adequate heating & ventilation in the working area?	Y	✓				
Is the area around the workstation / workbench clear of any obstructions?	Y	✓				
Are walkways clear of obstructions?	Y	✓				
Are items stacked on shelving properly?	Y	✓				
Is the flooring: slippery, uneven, sloped or have holes?	Y	✓				
Is there any loose or ripped carpeting?	N		✓			
Are radiators clear of anything combustible?	Y	✓				
Do any cables or wires run across the floor?	N	✓	✓			
Are all electrical cables in good condition?	Y	✓				
Is there space within and around the workstation / workbench to work?	Y	✓				
Are there any sources of distracting noise?	N		✓			
Are there any problems with static electricity?	N		✓			
Is there a Fire extinguisher in the working area?	N		✓	✓		
Have you been trained in the use of Fire extinguishers and fire prevention techniques?	Y	✓				
Do you know what to do in the event of a fire?	Y	✓				
Are you aware of the fire assembly point?	Y	✓				
Do you know what & where the fire alarm is?	Y	✓				
Is protective clothing and equipment provided?	Y	✓				
Is it effective?	Y	✓				
Do you have a pre-existing medical condition or health problem?	N		✓			
Are you pregnant?	N		✓			

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
Does the task involve holding a load away from your body?	No					
Does the task involve reaching upwards?	Yes			Low		
Does the task involve strenuous pushing or pulling?	No					
Does the task involve moving or carrying a load over a long distance?	No					
Does the task involve excessive or continuous lifting?	No					
Does the task involve stooping to lift or lower the load?	No					
Does the task involve twisting the trunk?	No					
Does the task involve repetitive or prolonged handling?	No					
Does the task involve unusual strength or height?	No					
Does the task involve sudden / unpredictable movements?	No					
Are there others to assist with lifting?	Yes					
Are packages heavy?	No					
Are packages bulky?	Yes					
Are packages difficult to hold?	No					
Are packages unstable?	No					
Do packages have contents that are sharp?	No					
Do packages have contents that are awkward in size?	No					
Do packages have contents that are potentially dangerous?	Yes			Low		
Do packages have contents that are likely to move?	No					
Do packages have Hazardous substances present?	Yes			Low		

Personnel Questionnaire **Name:**
Risks / Hazards **Date:**

		RISK?		LEVEL of RISK		
Workstations	**Y/N**	**Yes**	**No**	**Low**	**Medium**	**High**
Have you been trained on good ergonomic practices?						
Have you been given all available information on the use of display screen equipment?						
Is there a system for users to report faults relating to display screen work?						
Are you taking appropriate breaks from display screen work?						
Is your chair in good working condition and adjustable?						
Do you sit correctly in the chair?						
Can you place both feet flat on the floor?						
If not, is a footrest provided?						
Is your chair adjusted to the proper height for your display screen?						
Is the desk high enough for use with display screen equipment?						
Is the screen free from glare and reflections?						
If not, is a screen filter provided?						
Can you work comfortably at your workstation?						

Personnel Questionnaire
Risks / Hazards

Name: Lisa Leggoe
Date: 18.8.10.

Personal & Personal Working Area	Y/N	RISK? Yes	RISK? No	LEVEL of RISK Low	LEVEL of RISK Medium	LEVEL of RISK High
Is the work area clean and tidy?	Y		✓	✓		
Is there sufficient lighting?	Y		✓	✓		
Is the temperature comfortable? - varies.			✓	✓		
Is there adequate heating & ventilation in the working area?	Y		✓	✓		
Is the area around the workstation / workbench clear of any obstructions?	Y		✓	✓		
Are walkways clear of obstructions?	Y		✓	✓		
Are items stacked on shelving properly?	Y		✓	✓		
Is the flooring: slippery, uneven, sloped or have holes?	N		✓	✓		
Is there any loose or ripped carpeting?	N		✓	✓		
Are radiators clear of anything combustible?	Y		✓	✓		
Do any cables or wires run across the floor? - Yes - under my desk!	Y				✓	
Are all electrical cables in good condition?	Y		✓	✓		
Is there space within and around the workstation / workbench to work?	Y		✓	✓		
Are there any sources of distracting noise?	N		✓	✓		
Are there any problems with static electricity?	N		✓	✓		
Is there a Fire extinguisher in the working area?						
Have you been trained in the use of Fire extinguishers and fire prevention techniques?	Y		✓	✓		
Do you know what to do in the event of a fire?	Y		✓	✓		
Are you aware of the fire assembly point?	Y		✓	✓		
Do you know what & where the fire alarm is?	Y		✓	✓		
Is protective clothing and equipment provided?	Y		✓	✓		
Is it effective?	Y		✓	✓		
Do you have a pre-existing medical condition or health problem?	Y					
Are you pregnant?	N.					

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
	Y/N	YES	NO	Low	Med	High
Does the task involve holding a load away from your body?						
Does the task involve reaching upwards?						
Does the task involve strenuous pushing or pulling?						
Does the task involve moving or carrying a load over a long distance?						
Does the task involve excessive or continuous lifting?						
Does the task involve stooping to lift or lower the load?						
Does the task involve twisting the trunk?						
Does the task involve repetitive or prolonged handling?						
Does the task involve unusual strength or height?						
Does the task involve sudden / unpredictable movements?						
Are there others to assist with lifting?						
Are packages heavy?						
Are packages bulky?						
Are packages difficult to hold?						
Are packages unstable?						
Do packages have contents that are sharp?						
Do packages have contents that are awkward in size?						
Do packages have contents that are potentially dangerous?						
Do packages have contents that are likely to move?						
Do packages have Hazardous substances present?						

Personnel Questionnaire
Risks / Hazards

Name: M. GREEN
Date: 17-8-10

Personal & Personal Working Area	Y/N	RISK? Yes	RISK? No	LEVEL of RISK Low	Medium	High
Is the work area clean and tidy?	Y	✓		✓		
Is there sufficient lighting?	Y		✓			
Is the temperature comfortable?	Y		✓			
Is there adequate heating & ventilation in the working area?	Y		✓			
Is the area around the workstation / workbench clear of any obstructions?	Y	✓		✓		
Are walkways clear of obstructions?	Y	✓		✓		
Are items stacked on shelving properly?	Y	✓		✓		
Is the flooring: slippery, uneven, sloped or have holes?	N	✓		✓		
Is there any loose or ripped carpeting?	N		✓			
Are radiators clear of anything combustible?	N		✓			
Do any cables or wires run across the floor?	N		✓			
Are all electrical cables in good condition?	Y	✓		✓		
Is there space within and around the workstation / workbench to work?	Y	✓		✓		
Are there any sources of distracting noise?	Y	✓		✓		
Are there any problems with static electricity?	Y		✓			
Is there a Fire extinguisher in the working area?	Y	✓		✓		
Have you been trained in the use of Fire extinguishers and fire prevention techniques?	Y	✓		✓		
Do you know what to do in the event of a fire?	Y	✓		✓		
Are you aware of the fire assembly point?	Y	~~✓~~	✓			
Do you know what & where the fire alarm is?	Y		✓			
Is protective clothing and equipment provided?	Y		✓			
Is it effective?	Y		✓			
Do you have a pre-existing medical condition or health problem?	Y		✓			
Are you pregnant?	N		✓			

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
	Y/N	YES	NO	L	M	H
Does the task involve holding a load away from your body?	Y	X		X		
Does the task involve reaching upwards?	Y					
Does the task involve strenuous pushing or pulling?	N					
Does the task involve moving or carrying a load over a long distance?	N					
Does the task involve excessive or continuous lifting?	N					
Does the task involve stooping to lift or lower the load?	N					
Does the task involve twisting the trunk?	N					
Does the task involve repetitive or prolonged handling?	Y					
Does the task involve unusual strength or height?	N					
Does the task involve sudden / unpredictable movements?	N					
Are there others to assist with lifting?	Y					
Are packages heavy?	Y		X			
Are packages bulky?	Y					
Are packages difficult to hold?	Y					
Are packages unstable?	N					
Do packages have contents that are sharp?	N					
Do packages have contents that are awkward in size?	N					
Do packages have contents that are potentially dangerous?	N					
Do packages have contents that are likely to move?	N					
Do packages have Hazardous substances present?	N					

Personnel Questionnaire
Risks / Hazards

Name:
Date:

		RISK?		LEVEL of RISK		
Workstations	Y/N	Yes	No	Low	Medium	High
Have you been trained on good ergonomic practices?	Y	✓		✓		
Have you been given all available information on the use of display screen equipment?	Y	✓		✓		
Is there a system for users to report faults relating to display screen work?	Y	✓		✓		
Are you taking appropriate breaks from display screen work?	Y	✓		✓		
Is your chair in good working condition and adjustable?	N	✓			✓	
Do you sit correctly in the chair?	Y	✓		✓		
Can you place both feet flat on the floor?	Y		✓			
If not, is a footrest provided?						
Is your chair adjusted to the proper height for your display screen?	Y		✓			
Is the desk high enough for use with display screen equipment?	Y		✓			
Is the screen free from glare and reflections?	Y		✓			
If not, is a screen filter provided?						
Can you work comfortably at your workstation?	Y	✓		✓		