

Ergonomic Evaluation Request Form

EGUSD Risk Management will provide a certified In-House Ergonomic Evaluator to evaluate an employee's workstation. The evaluation will consist of an interview with the employee to determine how effectively the workstation enables the performance of job duties/tasks.. The evaluator will make recommendations regarding work processes and workstation equipment. Please complete this Request form. Within about 2 working days of receipt in the Risk Management Department, you will be contacted to schedule an appointment for an evaluation. Please allow up to 90 minutes for the appointment.

Date:

Person requesting evaluation (please print):

Person evaluation is for (please print):

Position:

Work Schedule:

Site:

Room/Office:

Phone:

Email:

Reason for request:

Physical concerns:

Brief description of job tasks:

Check all that may apply

Computer _____minutes per day

Data Lookup

Data Entry

Phone _____minutes per day

Answering calls

Placing Calls

10-Key _____minutes per day

On Computer

Adding Machine

Reading _____minutes per day

Email

Writing _____minutes per day

Manager/Administrator Authorization for Ergonomic Evaluation: the school site/department may be responsible for all or part of the cost of any equipment or adjustments needed.

Name

Signature

Title