RESEARCH SAFETY

Job Hazard Analysis Form

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JOB TITLE							
EMPLOYEE							
Employee Last Name	Employee First Name		Supervisor Last	Name	Superviso	r First Name	
	Comments/Notes						
Department							
Lesetter							
Location							
REQUIRED PPE							
Safety Glasses	Safety Goggles	Face Sh	ield	Gloves, specify	:		
Lab Coat	Respiratory Protection, spe	cify		Close-toed shoe	es	Steel-toed boots	
UV Protection	Gown/scrubs	Hearing	protection	Hard Hat			
Other:							
ENGINEERING CONTROLS							
Fume Hood	Snorkel Hood	Snorkel Hood Filter Hood Biological Safety Cabinet					
Other:							
ADMINISTRATIVE CONTROL	.S						

TASK

JOB PROCESS DESCRIPTION (STEPS TAKEN)	POTENTIAL HAZARD	RECOMMENDED ACTION

Environmental Health & Safety | Charles River Campus: 353-4094 | Medical Campus: 638-8830 | Web: http://www.bu.edu/EHS

