

Checklist of E/OHS Activities for Hearing Conservation

Program Contact Person: Art Schweitzer

Is the Hearing Conservation Plan in place? **Yes** No

Is the Plan current? **Yes** No

Has the Plan been reviewed this school year? **Yes** No

Has the school been surveyed for noise hazards? **Yes** No

Have sound level measurements been collected? **Yes** No

Have the results been documented? **Yes** No

Location: Activities Manual

Has training been scheduled or completed for affected individuals this school year?

Yes No **N/A**

Date: _____

Presenter: _____

Have regulatory changes occurred that may affect this program? No



Client: Ellsworth Public Schools

Measuring Device: Sound Level Meter		Calibration: Pre _____ Post _____	
Reason for Testing: General Survey			
Affected Personnel: Band Custodial, Maintenance, Shop			
Location	Equipment	Results	Recommendations
Boiler Room	Boiler	80-83.5 dBA	
Band Room	Instruments	77-85 dBA	
Cafeteria	Lunch time	70-73.4 dBA	

Completed by: _____ Eileen Carlson _____ **Date** _____ 2/12/16 _____

Notes: Tested a few areas for sound levels and all was within normal limits -EC

