

NEW EMPLOYEE POTENTIAL HAZARD EVALUATION

The Department of Environmental Health & Safety & Risk Management Services (EH&S) would like to assure that your safety is a priority in each work-related activity you undertake in your new position. Your response to a few questions regarding potential hazards associated with your new position will provide EH&S with the information necessary to facilitate training and/or provide relevant information for your use. We look forward to your timely response. *Please consult your supervisor or position description if you are not sure how to respond.*

PLEASE ANSWER THE FOLLOWING QUESTIONS BY CHECKING THE APPROPRIATE BOX

- 1! Will you be using hazardous materials in the routine performance of your job? Y[®] N[®]
- 2! Will anyone you supervise (including students) be using hazardous materials? Y[®] N[®]
3. Please review the following list of potential hazards, identify all which are associated with your new position, and whether or not you have received training within the last 12 months.

	POTENTIAL HAZARD INVOLVED	USE OR EXPOSURE	TRAINING
A	Power Tools	Y [®] N [®]	Y [®] N [®]
B	Welding Equipment	Y [®] N [®]	Y [®] N [®]
C	Radioactive Materials or Equipment	Y [®] N [®]	Y [®] N [®]
D	Lasers	Y [®] N [®]	Y [®] N [®]
E	Ultraviolet or Infrared Generating Equipment	Y [®] N [®]	Y [®] N [®]
F	High Voltage Equipment	Y [®] N [®]	Y [®] N [®]
G ¹	Biohazardous/Infectious Materials	Y [®] N [®]	Y [®] N [®]
H	Live Animals for Research	Y [®] N [®]	Y [®] N [®]
I ¹	Registered/Suspected Carcinogens	Y [®] N [®]	Y [®] N [®]
J	Compressed Gases	Y [®] N [®]	Y [®] N [®]
K	Food Preparation	Y [®] N [®]	Y [®] N [®]
L	Fieldwork or Surveys	Y [®] N [®]	Y [®] N [®]
M	Scientific Diving	Y [®] N [®]	Y [®] N [®]
N ¹	Powered Industrial Vehicles	Y [®] N [®]	Y [®] N [®]
O	Driving University Vehicles	Y [®] N [®]	Y [®] N [®]
P ¹	Controlled Substances	Y [®] N [®]	Y [®] N [®]

¹State and Federal regulations, and University policy mandate initial and periodic training.

4. Will you be required to spend 50% or more of your time operating a desktop computer? Y[®] N[®]
5. Identify Personal Protective Equipment/Devices that you will require on the job: _____
6. Will your job require entry into 'confined spaces'? Y[®] N[®]
7. In the event of an emergency, will you require evacuation assistance? Y[®] N[®]
8. Are you aware of FIU's Emergency Management Response Procedures? Y[®] N[®]
(Check the back of your telephone directory)

I acknowledge that the information given above represents my understanding of potential work-related hazards and that I will notify the EH&S department if and when new potential hazards become known to me.

 Employee Signature

email: _____

Work Phone: _____

Date: _____

Date received by EH&S: _____

The Department of Environmental Health &
Safety



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to
Florida International University