|  |
| --- |
| **Evaluation Information:** |
| Employee Name | Bureau/Division | Job Title |
|       |       |       |
| Evaluator Name | Evaluation Location | Date of Evaluation |
|       |       |       |
| **Chair Acceptable Needs Improvement** |
| Support for the lower back (lumbar) [ ]  [ ]   |
| Seat not too narrow or too wide [ ]  [ ]  |
| Feet on floor [ ]  [ ]  |
| Back of knees not tight against seat [ ]  [ ]   |
| Knees/thighs not tight against undercarriage of keyboard tray [ ]  [ ]  |
| Overall ability to properly adjust chair based on workstation set up [ ]  [ ]  |
| Armrests positioned to support forearms while typing [ ]  [ ]   |
| **Keyboard and Mouse** |
| Tray adjusted to a height that promotes neutral typing position [ ]  [ ]  |
| Tray has room to hold mouse (or other device) [ ]  [ ]  |
| Wrists not resting on tray or sharp edges while typing [ ]  [ ]  |
| Mouse (or other device) correct size for hand [ ]  [ ]  |
| **Monitor** |
| Approximately at arm’s length away (dependent upon user) [ ]  [ ]  |
| Top of monitor at eye level or adjusted properly [ ]  [ ]  |
| Positioned directly in front [ ]  [ ]  |
| Glare on screen from direct sunlight or other lighting [ ]  [ ]  |
| **Environment** |
| Adequate space under desk to sit properly and stretch legs [ ]  [ ]  |
| Lighting acceptable for user – knows how to adjust desk lighting [ ]  [ ]  |
| Ventilation – not too hot or too cold [ ]  [ ]  |
| **Work Practices** |
| Frequency of breaks [ ]  [ ]  |
| Keyboarding posture [ ]  [ ]  |
| Sitting posture [ ]  [ ]  |
| Phoning posture/Use of headset [ ]  [ ]  |
| Document holder kept close to monitor [ ]  [ ]  |
| Alternate tasks [ ]  [ ]  |
| **Recommended Items** |
| [ ]  Adjustable keyboard/mouse tray [ ]  Monitor riser [ ]  Adjustable chair [ ]  Wrist rest [ ]  Anti-glare screen [ ]  Lumbar support cushion [ ]  Mouse bridge or pad [ ]  Slant board for reading [ ]  Foot rest [ ]  Telephone headset [ ]  Document holder [ ]  Other       |
| **Comments** |
|       |

