



## Alternate Work Location Safety and Security Checklist

*With few exceptions, you have the right to request, receive, review and correct information about yourself collected using this form.*

**INSTRUCTIONS** This form should be used to ensure steps have been taken to address the safety and security of the employee and of university owned equipment issued in accordance with SAP 33.06.01.M0.01, if applicable.

|                |               |
|----------------|---------------|
| Employee Name: | Title:        |
| Department:    | AWL Location: |

### Alternate Work Location

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | The employee has clearly defined workspace that is kept clean and orderly.                     |
| <input type="checkbox"/> | The lighting is adequate for assigned tasks.   |
| <input type="checkbox"/> | Exits are free of obstructions.  |
| <input type="checkbox"/> | Supplies and equipment (both departmental and employee-owned) are in good condition.           |
| <input type="checkbox"/> | The work area is well ventilated and heated for assigned tasks.                                |
| <input type="checkbox"/> | Storage is organized to minimize risks of fire and spontaneous combustion.                     |
| <input type="checkbox"/> | Cords, cable or other items are placed in an orderly fashion to prevent a tripping hazard.     |
| <input type="checkbox"/> | Surge protectors are used for Texas A&M University-owned computers, fax machines and printers. |
| <input type="checkbox"/> | Heavy items are securely placed on sturdy stands close to walls.                               |
| <input type="checkbox"/> | Computer components are kept out of direct sunlight and away from heaters.                     |

### Emergency preparedness

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Emergency phone numbers (hospital, fire and police departments) are posted at the AWL. |
| <input type="checkbox"/> | A first aid kit is easily accessible and replenished as needed.                        |
| <input type="checkbox"/> | Portable fire extinguishers are easily accessible and serviced as needed.              |

### Ergonomics

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | The workstation (desk, chair, computer and other equipment) is arranged to be comfortable without unnecessary strain on the back, arms, neck etc. |
|--------------------------|---|

### Security of Information Resources

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | University Rule 29.01.03.M2, Rules for Responsible Computing has been reviewed. |
|--------------------------|---|

### Other Safety or Security Items

|                          |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> |                   |
| <input type="checkbox"/> |                   |
| <input type="checkbox"/> | Comments attached |

### Employee Certification

|   |       |
|---|-------|
| I have reviewed this checklist with my supervisor and have taken steps to ensure safety and security at my alternate work location. I understand this checklist is not all-inclusive and it is my duty as an employee of Texas A&M University to create and maintain a safe working environment at my AWL. I understand authorized department personnel may review my alternate work location with reasonable notice. |       |
| Signature:  | Date: |

### Supervisor Review

|  |       |
|--|-------|
| I have reviewed this form with the employee. |       |
| Signature:                                   | Date: |

|   |  |
|---|--|
| <b>DISTRIBUTION:</b><br>Original to Personnel File<br>Copies to Employee and Supervisor | <b>NEED HELP?</b><br>Employee Relations Office<br>(979) 862-4027<br><a href="mailto:employee-relations@tamU.edu">employee-relations@tamU.edu</a> |
|---|--|