**Appendix C**

**Summary of PPE Requirements**

|  |  |
| --- | --- |
| Summary Approved by: Must be a Supervisor, Manager, Faculty, P.I., etc: (Print and Sign) | Task or Work Area: |
| Date: | Work Unit and Department: |
| Campus location: | Job title of personnel conducting work: |

|  |  |  |
| --- | --- | --- |
| Task(s) or Work Area(s) | Potential Hazard(s) | PPE Required |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |