

Supervisor Request for Occupational Noise Evaluation

George Mason University supervisors may request an Occupational Noise Evaluation by filling out this form and returning it to the Environmental Health & Safety Office (EHS) at safety@gmu.edu.

SECTION 1 - SUPERVISOR CONTACT INFORMATION

Last Name	First Name	MI	G Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Department	Phone	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

SECTION 2 - LOCATION INFORMATION

Request Location: Indoor Outdoor

Building Name **Room #**

Work Area

SECTION 3 - WORK AREA CONDITIONS

Are affected employees in the Hearing Conservation Program? Yes No

of Employees Affected **Noise is described as:** Continuous Intermittent

Describe work process and equipment used:

Duration (In Minutes or Hours) **Frequency of Use (Per Day, Month, or Year)**

What type of Personal Protective Equipment (PPE) is used for this job?