

**Vermont Farm Safety Project**  
**University of Vermont Extension**  
**Vermont Agency of Agriculture**

Farm Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

|    |  | <u>Personal Protective Equipment (PPE) Checklist</u> |                          |                          | <u>Date</u>                            |                 |            |
|----|--|--|--------------------------|--------------------------|--|-----------------|------------|
|    |  | <u>Yes</u>   | <u>No</u>                | <u>N/A</u>               | <u>Comments or Improvements Needed</u> | <u>Improved</u> | <u>Who</u> |
| 1  | Do workers receive training on how to use PPE?   | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 2  | Is hearing protection available for workers?   | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 3  | Is eye protection available at all shop machines and other sources of eye hazards?   | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 4  | Are welding helmets, welding goggles in good condition and fitted with the appropriate lenses?                                   | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 5  | Is there an emergency eyewash station or a reliable source of freshwater available to flush eyes in emergencies?                 | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 6  | Do workers wear safety shoes when there are hazards for falling, rolling objects or around livestock?                            | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 7  | Are the appropriate respirators and dust masks available for workers?  | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 8  | Are leather work gloves available to workers?  | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 9  | Is clothing close fitting, hair put up, jewelry not worn, and no laces, hood strings/dangling items exposed?                     | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 10 | Do workers take measures to protect against sun exposure such as wearing sunscreen, broad brimmed hats, and long sleeved shirts? | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 11 | Are hard hats available?   | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 12 | Are chainsaw helmets and chaps available for tree/wood cutting activities?   | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 13 | Are MSDS posted in a convenient location?  | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |
| 14 | Other PPE safety issues? _____   | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | _____                                  | _____           | _____      |

From this PPE Safety Checklist, list improvements to be made.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_