

# Teacher's Classroom Checklist

Name: \_\_\_\_\_  
 School: \_\_\_\_\_  
 Room or Area: \_\_\_\_\_ Date Completed: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**Instructions**

1. Read the *IAQ Backgrounder* and the Background Information for this checklist.
2. Keep the Background Information and make a copy of the checklist for future reference.
3. Complete the Checklist.
  - Check the "yes," "no," or "not applicable" box beside each item. (A "no" response requires further attention.)
  - Make comments in the "Notes" section as necessary.
4. Return the checklist portion of this document to the IAQ Coordinator.

## 1. GENERAL CLEANLINESS

	Yes	No	N/A
1a. Ensured rooms are dusted and vacuumed regularly .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1b. Ensured rooms are free of clutter .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1c. Ensured that trash is removed daily .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1d. Ensured that no food is stored in classroom overnight .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1e. Ensured that animal food is stored in tightly sealed containers .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1f. Ensured room is free of pests and vermin .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1g. Used unscented, school-approved cleaners and air fresheners, if any, in rooms .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 2. ANIMALS IN THE CLASSROOM

2a. Minimized exposure to animal allergens .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2b. Ensured that animals are kept in cages (as much as possible) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2c. Ensured that cages are cleaned regularly .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2d. Placed animal cages away from supply and return vents .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2e. Consulted school nurse about student allergies or sensitivities (privacy laws may limit the information that health officials can disclose) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2f. Identified potential allergies of students .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2g. Moved sensitive students away from animals and habitats .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 3. DRAIN TRAPS IN THE CLASSROOM

3a. Ensured that water is poured down floor drains once per week (approx. 1 quart of water) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3b. Ensured that water is run in sinks at least once per week (about 2 cups of water) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3c. Ensured that toilets are flushed once each week, especially if not used regularly .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 4. EXCESS MOISTURE IN CLASSROOMS

4a. Ensured that condensate is wiped from windows, windowsills, and window frames .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4b. Ensured that cold water pipes are free of condensate .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4c. Ensured that indoor surfaces of exterior walls are free of condensate .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4d. Ensured areas around and under classroom sinks are free of leaks .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4e. Ensured classroom lavatories are free of leaks .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4f. Ensured ceiling tiles and walls are free of leaks (discoloration may indicate periodic leaks) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4g. Ensured that spills are cleaned promptly .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 5. THERMAL COMFORT

Yes No N/A

- 5a. Ensured moderate temperature (should generally be 72°F–76°F) .....
- 5b. Ensured there are no signs of draftiness .....
- 5c. Ensured that students are not seated in direct sunlight .....
- 5d. Ensured that indoor humidity is maintained at acceptable levels (between 30 and 60 percent) .....

## 6. VENTILATION

- 6a. Located unit ventilator .....
- 6b. Located air supply and return vents .....
- 6c. Ensured air is flowing from supply vent .....
- 6d. Ensured the air supply pathway is not obstructed .....
- 6e. Ensured there are no vehicle exhaust, kitchen/food, and chemical odors in the classroom .....
- 6f. Ensured there are no signs of mold or mildew (refer to **Appendix H** of the *IAQ Reference Guide*) .....
- 6g. Determined operability of windows .....

## 7. EDUCATIONAL SUPPLIES (Art, Science, Industrial/Vocational)

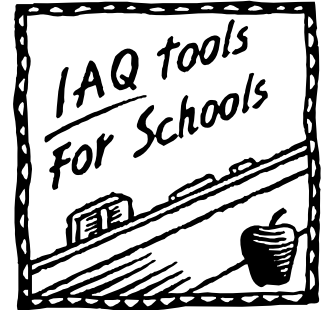
- 7a. Reviewed supplies and their labels .....
- 7b. Ensured that Material Safety Data Sheets are accessible .....
- 7c. Developed and implemented spill clean-up procedures .....
- 7d. Labeled all chemicals accurately with date of receipt/preparation and pertinent precautionary information .....
- 7e. Ensured that supplies are stored according to manufacturers' recommendations .....
- 7f. Understood and followed recommended procedures for disposal of used substances .....
- 7g. Ensured that compressed gas cylinders are stored securely .....
- 7h. Separated storage areas from main classroom area and ensured they are ventilated separately .....
- 7i. Used diluted substances rather than concentrates, wherever possible .....
- 7j. Minimized exposure to hazardous materials (i.e., used non-hazardous materials and pre-mixed products) .....
- 7k. Ensured that fume hoods capture respirable particles, gases, and vapors released within them .....

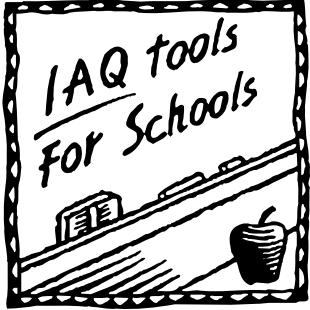
## 8. LOCAL EXHAUST FANS

- 8a. Identified major pollutant-generating activities, if any .....
- 8b. Located exhaust fan(s), if any .....
- 8c. Determined that fans operate .....
- 8d. Ensured that adjacent rooms or halls are free of odor .....

## 9. LOCKER ROOM

- 9a. Ensured locker room and showers are cleaned regularly and properly .....
- 9b. Checked that soiled clothes are removed regularly .....
- 9c. Ensured that wet towels are removed from locker room .....
- 9d. Ensured that there is water in the drain trap .....
- 9e. Verified that the local exhaust fan is functioning properly and used consistently .....





NOTES