

Worksite- Specific Procedure for Voluntary Use of Filtering Facepiece Respirator

All employees voluntarily using respiratory protection equipment must read and sign the *Voluntary Use of Respiratory Protection Agreement* form and be familiar with the contents of this plan and the university's Respiratory Protection Program, which employees may request from their supervisors, or can be found on the FM-OHS website. **The following information should be filled out by both the supervisor and FM-OHS, and reviewed by affected employees. Copies of this procedure will be retained by the supervisor and FM-OHS for recordkeeping until the procedure has been updated. Procedures must reflect the most current policies and practices.**

A. Departmental Information	
Organization:	Shop:
Supervisor:	Manager:
B. Task Details	
Name of Task:	Location of Task:
Duration of Task:	Frequency of Task:
Task Description:	
C. Respiratory Hazard and Filter Type	
<input type="checkbox"/> Nuisance Dust/Odors (N95/P100)	
C. Respirator Requirements	
Negative pressure: <input type="checkbox"/> Filtering facepiece Respirator	
Respirator storage area:	
Comments:	

Facilities Management
Occupational Health and Safety

Name	Type of Respirator