

Office/Computer Ergonomics Worksheet

Project #:	
Name:	
Department:	
Stature:	
Handedness:	Right Left
Date:	
Vision	

Job Title:	
Job Tasks:	

Workstation

Workstation:	Single/Multi User
Use:	Single/Multi Task
Other Work-station:	Yes/No

Equipment-Computer

Share Brand/Model	
Chair Features:	
• <i>Legs/Casters</i>	
• <i>Seat Pan</i>	
• <i>Back Support</i>	
• <i>Armrests</i>	
Chair Acceptable:	
<i>Fit:</i>	Yes/No
<i>Maintenance</i>	Yes/No

Work Surface

Configuration:	Straight, L-Shaped, Cockpit
Height:	Fixed/Adjustable
Surface:	Modular/Stand-alone
Comments:	

Equipment-Computer

Keyboard: <i>SL/MS Natural</i>	
Keyboard: <i>WS/Tray</i>	
Pointing Device: <i>Mouse/Roller ball</i>	
CPU: <i>Desk/Floor</i>	
Document Holder: <i>Yes/No</i>	

Equipment-Office

Telephone:	Head/Hand Set
10-key:	
Other:	

Storage

List	

Workstation

Illumination:	
Air:	
Noise:	

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Issue	Recommendation
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.

Recommended Specifications		Comments
Seating System	Seatpan height: _____ Seatpan depth: _____ Seatpan width: _____ Armrest Floor: _____ Armrest Seat: _____ Armrest width: _____ Other: _____	
Worksurface	Configuration: _____ Height: _____	
Computer	Keyboard height: _____ Pointing Device: _____ Monitor distance: _____ Monitor height: _____	