

Evaluate your Chemical Management Practices and Identify SC3 Program Goals

Worksheet 1: Evaluating Your School's Chemical Management Situation, Policies, and Procedures (cont'd)		
<u>Question</u>	<u>Answer</u> <i>(Circle One)</i>	<u>Description of Conditions</u>
Inventory		
Is there a policy or set of procedures for identifying out-of-date chemicals?	YES / NO	
Is there a comprehensive list of chemicals stored onsite for all departments?	YES / NO	
Are incoming chemicals added to a comprehensive list?	YES / NO	
Use		
Does my school have a Chemical Hygiene Plan or some kind of plan for responding to chemical emergencies?	YES / NO	
Are students and staff adequately trained to handle the chemicals they interact with?	YES / NO	
Do areas where chemicals are used or handled have up-to-date safety guides and functioning safety equipment?	YES / NO	

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<u>Question</u>	<u>Answer</u> <i>(Circle One)</i>	<u>Description of Conditions</u>
Disposal		
Are all hazardous/toxic wastes disposed of according to federal/state guidelines (e.g., NOT 'down-the-drain')?	YES / NO	
Are used or outdated chemicals disposed of within a reasonable timeframe (e.g., not 'stockpiled' in storage rooms)?	YES / NO	
Does the school retain a waste removal specialist to handle hazardous/toxic chemicals after use and/or outdated chemicals?	YES / NO	

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Worksheet 2: Defining SC3 Program Goals that Address Issues / Areas of Need		
SC3 Program Component	Issue / Area of Need	Program Goal
Purchasing	(1)	
	(2)	
Storage	(1)	
	(2)	
Inventory	(1)	
	(2)	
Use	(1)	
	(2)	
Disposal	(1)	
	(2)	

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Worksheet 3: Developing Performance Measures Based on Desired Goals			
Program Component	Goal	Deadline	Performance Measure
Purchasing			
Storage			

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Worksheet 3: Developing Performance Measures Based on Desired Goals (cont'd)			
Program Component	Goal	Deadline	Performance Measure
Inventory			
Use			

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Worksheet 3: Developing Performance Measures Based on Desired Goals (cont'd)			
Program Component	Goal	Deadline	Performance Measure
Disposal			

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Name of person(s) conducting evaluation: _____

Date evaluation was conducted: _____