

### **Home Workstation Self-Certification Checklist**

Employees working from home can use this checklist to ensure that their working environments are set up to minimize the risk of posture strain or injury. It is your responsibility to provide accurate answers to the questions below in order to help your employer assess the suitability of your home working set up. This document should be completed and returned to the human resources department.

#### **Keyboard**

**Is your keyboard separate from your screen?**

Yes / No

**Can you adjust the keyboard to find a comfortable typing position?**

Yes / No

**Are the characters on your keyboard clear and legible?**

Yes / No

**Do you have a wrist support?**

Yes / No

#### **Mouse/Trackpad**

**Is your mouse or trackpad functioning correctly?**

Yes / No

**Are you able to position your mouse or trackpad at a comfortable distance from your computer?**

Yes / No

**Do you know how to adjust the speed and other settings of your mouse or trackpad?**

Yes / No

#### **Screens**

**Are your screens clear and legible?**

Yes / No

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This resource is provided as companion content to our podcast [Global Solutions: Episode 5](#) and was last updated as of July 1, 2020. Employers may want to continue to monitor applicable government guidance for the latest developments regarding workplace safety and health for remote working environments.

**Are you able to easily adjust the positioning of your screen(s)?**

Yes/ No

**Can you adjust your screens so they are free from glares?**

Yes / No

**Does your workspace have adjustable window coverings?**

Yes / No

### **Furniture**

**Is your work surface large enough to accommodate all necessary equipment and papers?**

Yes / No

**Can you place all necessary equipment and papers within comfortable reach?**

Yes / No

**Are work surfaces free from glare and reflection?**

Yes / No

**Is your chair comfortable and stable?**

Yes / No

**Can you adjust the back and arms of your chair to achieve a comfortable seated position?**

Yes / No

**Is your back supported by your chair?**

Yes / No

**When you are seated are your eyes roughly level with top of your screen and can your feet reach the floor comfortably?**

Yes / No

### **Environment**

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**Do you have enough room to change positions when working and to move around comfortably?**

Yes / No

**Is the temperature of your working environment comfortable?**

Yes / No

**Is there adequate air circulation in your working environment?**

Yes / No

**Is the noise level in your working environment comfortable?**

Yes / No

**General**

**Have you experienced any discomfort as a result of the home workstation you are using?**

Yes / No

**Do you have any other concerns about you home working environment?**

Yes / No

**If yes, insert details:**

If you have any concerns about the safety of your home working environment following completion of this checklist, please contact the human resources representative who can provide further advice and assistance.