



OFFICE OF RISK & DISABILITY MANAGEMENT

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Keyshun Marshall, *Director II*

Ergonomic Evaluation Request Information Sheet

Please note: SIA is currently offering virtual ergo evaluations. You will need audio/video capabilities to complete the evaluation.

You will need to take measurements prior and after your evaluation. A tape measure is available on a bookcase in Risk Management; please feel free to use it and please return it as soon as possible. If you have any questions, please contact Martine Kruger.

Name:

Phone Number:

Title:

Email:

Supervisor's Name:

Supervisor's Number:

Site Name:

Room#/ Cubicle:

Site Address:

Reason for Evaluation:

Contact Cell Number:

Please submit completed form to Risk & Disability Management.

FOR RISK MANAGEMENT USE ONLY

Date Received: _____

Date to SIA: _____