

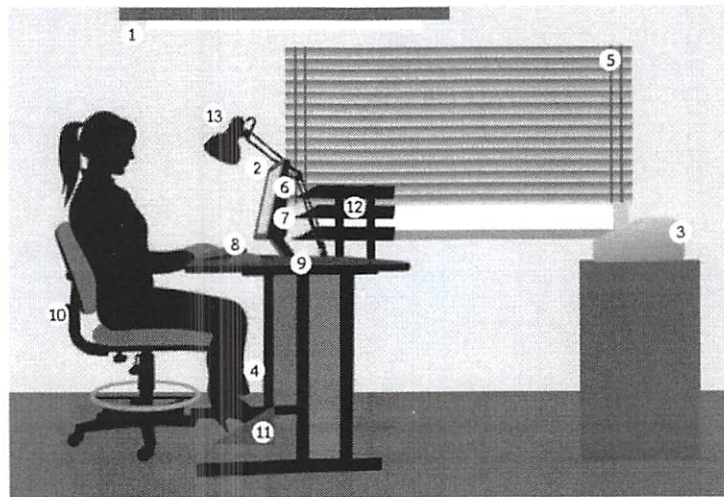
6	Is the software you are using suitable for the task and your level of experience? Do you find it easy to use?	Yes	<input checked="" type="checkbox"/>	No		Comments	
7	Does your screen have a stable image with easy to read characters? Can you adjust the brightness?	Yes	<input checked="" type="checkbox"/>	No		Comments	
8	Is your keyboard adjustable, tiltable, detachable and easy to use? Is it free from reflective glare? Can you find a comfortable keying position? Is there enough space to rest your hands in front of the keyboard?	Yes	<input checked="" type="checkbox"/>	No		Comments	
9	Does your work surface have a sufficiently large, low reflective surface and allow a flexible arrangement of screen, keyboard, documents and related equipment?	Yes	<input checked="" type="checkbox"/>	No		Comments	
10	Is your work chair stable and sufficiently adjustable to allow freedom of movement and a comfortable position?	Yes	<input checked="" type="checkbox"/>	No		Comments	
11	Is a footrest available if you require one? Answer Yes if you do NOT require a footrest.	Yes	<input checked="" type="checkbox"/>	No		Comments	
12	If you require a document holder is it stable, adjustable and positioned to minimise the need for uncomfortable head and eye movements?	Yes	<input checked="" type="checkbox"/>	No		Comments	
13	Are you free from any visual difficulties that may be caused by your DSE work? Is an eye test available to you if you require one?	Yes	<input checked="" type="checkbox"/>	No		Comments	
14	Do you have regular breaks or changes in activity to prevent working at the DSE for long periods?	Yes	<input checked="" type="checkbox"/>	No		Comments	

Display screen equipment (DSE) user questionnaire

This form should be completed by all DSE users prior to an assessment of their workstation. Users should have been given relevant DSE information, a suitable time to read and understand that information and opportunities to ask questions on it.

All questions should be answered and additional comments provided where "No" responses are given.

Name:	<i>Abe Raboin</i>	Workstation:	
Signed:	<i>A. Raboin</i>	Date:	<i>23/05/17</i>



1	Is there adequate lighting?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Comments	
2	Is there adequate contrast between the screen and background environment? Is your screen free from glare and disturbing reflections?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Comments	
3	Has any distracting noise been minimised? Are the levels of light, heat and noise comfortable? Does the air feel comfortable?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Comments	
4	Do you have enough leg room and space to allow you to move freely?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Comments	
5	Are all windows fitted with a suitable covering to allow you to adjust the light falling on your workstation?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Comments	