**Western Oregon University**

**RESPIRATOR FIT TEST**

 Name Date

1.

North  Wilson  Binks 

Other  Specify Type

2. Respirator used for fit test:

3. Frequency of use: Less than once a month 

 Two to five times a month 

 One to four times a week 

 Five to 10 times a week 

4. Respirator size: Small  Medium  Large 

5. Qualitative Tests: ("P" for Pass; "F" for Failed; "D" for Did Not Test)

 Positive Pressure Banana Oil Test

 Negative Pressure Irritant Fume Test

6.

 Test Administrator's Name

7. Comments

 (This document is to remain on file for three years with a copy forwarded to Occupation / Environmental Safety Department at Campus Public Safety.)

8. **Respirator Maintenance**:

 Inspected Dates:

 Discrepancies Repaired: