

1. Have you experienced concerns in the past year because of any of the following in your current physical workplace?

168	15%	Air Quality
40	4%	Structural Damage
35	3%	Asbestos
98	9%	Mold
115	10%	Leaks
95	9%	Noise/Vibration (i.e. white noise)
121	11%	Construction/Renovation Activities(Noise, dust, odors, obstructions, etc.)
257	23%	Indoor Temperature
44	4%	Flooring issues (uneven floors, raised tiles etc.)
92	8%	Ergonomics
33	3%	Other

2. Have you or any of your co-workers experienced physical symptoms that made it difficult for you to stay in your assigned workplace?

157	39%	Yes
223	55%	No
26	6%	N/A

3. Do you know who you should contact about any medical symptoms that appear to be related to only your physical workplace environment?

144	35%	Yes
260	63%	No
7	2%	N/A

4. Has your building undergone any renovations? If yes, how recently? Choose the period that best fits:

38	9%	Currently under renovation
100	25%	1-6 months ago
57	14%	Less than 2 years ago
30	7%	Less than 5 years ago
78	19%	More than 5 years ago
105	26%	N/A

5. Are/were you notified when renovations are/were going to be done to your building?

276	78%	Yes
79	22%	No

6. Do you know who the emergency contact person is in your building?

229	56%	Yes
179	44%	No

7. Are/were you given an option of alternative workspace when renovations are/were in close proximity to your workspace?

117	36%	Yes
210	64%	No

8. Have you ever had an issue or concern brought to your attention by a co-worker, student, or staff member related to your shared physical workplace environment?

211	53%	Yes
187	47%	No

9. Has there been a good response by the University to ameliorate any workplace concerns that you or your coworkers have had?

144	36%	Yes
122	30%	No
138	34%	N/A

10. Is there is a plan in place to evacuate your building in case of a safety issue?

221	54%	Yes
31	8%	No
158	39%	Don't know

Building Name

320	77%
------------	------------

Please indicate your gender

86	21%	Male
313	78%	Female
3	1%	Other