

Coachella Valley Unified School District
SAFETY INSPECTION CHECKLIST – Grades K – 6
(Note: Safety Inspections must be performed monthly)

This checklist is intended as a guide.

Please look for other unsafe conditions and report them so that corrective action can be taken immediately.)

PLAYGROUND EQUIPMENT

- | | S | N |
|---|--------------------------|--------------------------|
| 1. Swing sets securely anchored | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Swing set seats, chains and hooks in safe condition | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Backstops securely anchored | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Backstop fencing in safe condition | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Wood equipment free of splinters and dry rot | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Teeter-totters, merry go rounds, and slides free of cracks and sharp edges | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Slides securely anchored; ladder secure; treads in good condition | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Climbing apparatus securely anchored | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Climbing apparatus free of sharp edges | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Bolts, fasteners and pivotal connectors free of wear on all equipment | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Cushioning material under all equipment | <input type="checkbox"/> | <input type="checkbox"/> |

GROUNDS AND FIELDS

- | | S | N |
|---|--------------------------|--------------------------|
| 1. Blacktop, playing courts and sidewalks free of holes or cracks | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. No dirt or water flowing on sidewalk | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Area free of debris and broken glass | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Shrubs and trees – no branches hanging over walkways | <input type="checkbox"/> | <input type="checkbox"/> |

- | | | |
|--|--------------------------|--------------------------|
| 5. Fencing free of sharp corners and edges | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Fields level, free of holes and foreign objects | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Sprinklers in proper repair and not protruding | <input type="checkbox"/> | <input type="checkbox"/> |

MULTIUSE ROOMS / GYMNASIUMS

- | | S | N |
|--|--------------------------|--------------------------|
| 1. Stairs, ramps, floors and aisles kept clean and dry | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Floors free of tripping hazards | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Seating free of splinters, torn upholstery, or loose hardware | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Bleacher seats and steps in good condition | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Stage rigging, ropes, blocks and tackles in good repair | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Stairs equipped with threads and handrails | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Exits properly marked; exit lights working | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Emergency lighting system operating properly | <input type="checkbox"/> | <input type="checkbox"/> |

MISCELLANEOUS

- | | S | N |
|---|--------------------------|--------------------------|
| 1. All fire extinguishers properly maintained/charged | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. First aid kits properly stocked | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Hallway exits properly marked | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Access to electrical, gas and water shut offs unobstructed | <input type="checkbox"/> | <input type="checkbox"/> |

S = Satisfactory N = Unsatisfactory

Describe any unsafe conditions not listed above: _____

Have work orders been issued for correction of unsatisfactory conditions? Yes No List work order numbers: _____

Supervisor: _____ School _____ For Month of _____

Signature _____ Print Name: _____ Date _____