



RHODE ISLAND
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

235 Promenade Street, Providence, RI 02908-5767

TDD 401-222-4462

Chemical Use in Schools: A Statewide Survey to Reduce the Use of Hazardous and Toxic Substances

Please fill out all sections of this form. There are a total of four sections. This is a fillable document. After all fields are filled, you may save it and email it back to either james.ball@dem.ri.gov or ann.battersby@dem.ri.gov. Please email with any questions you may have.

I. School Contact Information

School Name _____

Address _____

City/Town _____ ZIP/Postal Code _____

Phone Number _____

Primary Contact Name _____

E-Mail _____ Phone Number _____

Name of Individual Completing Survey _____

Is your school a regional school? If so, please indicate towns served _____

II. Facility Operations

Please describe the types of cleaning you conduct in your school (Select all that apply.) If you hire a company to conduct your cleaning services, please indicate in the box below the name of the company and contact information so we may contact them directly.

- General Cleaning
- Carpets
- Hardwood Floors
- Tile and Specialty Floors
- Drain, Dryer Vent, and Miscellaneous
- Pools
- Windows
- Other (Please Specify:)

Please list all contractors including contact information which your school utilizes for cleaning services.

III. Cleaning Chemical Inventory

Please list all **Product Names** of cleaning products utilized at your school. Please list approximate annual usage and the unit size of the product. For example, you may use 5 gallons a year but purchase the product in 10 gallons units. Also, please indicate whether the product is a green cleaner. This will be identified by a “**Green Seal**” or “**Eco Logo**” or “**Design for the Environment (DfE)**” logo on the container. If you need more space, feel free to attach additional copies of this sheet to the end of the survey.

Full Product Name with Brand and/or Manufacturer	Approximate Annual Usage Rate (in Number of Units ex. 5 gallons)	Unit Size (in gal, lbs, or oz)	GreenSeal, EcoLogo, DfE certified
1.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
2.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
3.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
4.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
5.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
6.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
7.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
8.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
9.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
10.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
11.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
12.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
13.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown

IV. Hazardous Chemical Inventory – Chemistry & Science Laboratories, Art Studios, Metals & Wood Shops, Grounds Keeping, and Maintenance Departments.

Please list all chemicals that you would like removed from your campus. Hazardous chemicals and toxic substances are likely to be found in the above referenced Departments. Also, please indicate an approximate amount of each substance. If you need more space, feel free to attach additional copies of this sheet to the end of the survey.

Chemical Name	Unit Size (in gal, lbs, or oz)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	