

Environmental Demands Rating Worksheet

Name: _____

Complete this worksheet **as you read** about each type of environmental demand on the website. This worksheet will help you identify your tolerance levels for various environmental demands. Read each environmental demand. Place a check mark in the column that best describes how you feel about that demand.



I would like this.



I am okay with this.



This is NOT okay.

Location:	I would like this.	I am okay with this.	This is NOT okay.
Indoors, climate controlled (a place that has AC and heat)			
Indoors, not climate controlled (a place without AC or heat)			
Outdoors			
Noise Level:	I would like this.	I am okay with this.	This is NOT okay.
Quiet noise level (2 on a scale of 1-10)			
Moderate noise level (5 on a scale of 1-10)			
Loud noise level (8 on scale of 1-10)			
Phones ringing			
Loud machinery			
Background music			
People talking			
Office machines (faxes, copiers, printers)			
Lighting Level:	I would like this.	I am okay with this.	This is NOT okay.
Low or dim lighting levels			
Medium lighting levels			
Florescent lighting levels			
Indoors with many windows for natural lighting			
Outdoors in the sun			

Work hours:	I would like this.	I am okay with this.	This is NOT okay.
Full time, regular hours (i.e. 9am – 5pm)			
Evening hours (i.e. 5pm – 11pm)			
Part time (i.e. 9am – 1pm)			
Amount of movement:	I would like this.	I am okay with this.	This is NOT okay.
Sitting for most of the day			
Combination of sitting, walking, standing across the day			
Standing for most of the day			
Cleanliness and odors:	I would like this.	I am okay with this.	This is NOT okay.
Getting messy (work clothes, hands, shoes)			
Getting dirty (work clothes, hands, shoes)			
Getting wet (work clothes, hands)			
Getting sweaty			
Staying neat and clean			
Food odors			
Perfume odors			
Cleaning supply odors			
Oil, gasoline odors			
Paint odors			
Work attire:	I would like this.	I am okay with this.	This is NOT okay.
Wearing casual clothing			
Wearing business casual clothing			
Wearing professional / business clothing			
Wearing a uniform			
Work pace:	I would like this.	I am okay with this.	This is NOT okay.
Changing your work pace (between steady, peak, and slow)			
Working at a fairly steady pace for most of the day			
Predictability:	I would like this.	I am okay with this.	This is NOT okay.
Doing the same tasks each day			
Doing different tasks each day			
Working in same area each day			
Working in different areas each day			
Doing tasks in a different order each day			
Doing tasks in the same order each day			
Working with the same people each day			
Meeting new customers each day			

Review the items to which you responded “I would like this.” These are things that you prefer in a work environment.

List your top picks below:

1. _____
2. _____
3. _____
4. _____
5. _____

Review the items to which you responded “This is NOT okay.” List the most important ones below:

1. _____
2. _____
3. _____