

HEARING PROTECTION FIT-TEST RECORD

1. DATE (YYYYMMDD)

PRIVACY ADVISORY

Disclosure of this information is voluntary and will be used to document the results of a fit test for a hearing protection device. When completed, this form contains personally identifiable information and is protected by the Privacy Act of 1974, as amended.

2. NAME (Last, First, Middle Initial)	3. DOD ID NUMBER	4. DATE OF BIRTH (YYYYMMDD)
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5. DOD COMPONENT A - ARMY F - AIR FORCE S - SPACE FORCE N - NAVY M - MARINE CORPS 1 - OTHER	6. SERVICE COMPONENT <input type="checkbox"/> REGULAR <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> RESERVE <input type="checkbox"/> CIVILIAN <input type="checkbox"/> OTHER (Specify) _____
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7. SERVICE DUTY OCCUPATION CODE	8. CIVILIAN JOB SERIES	9. INSTALLATION/COMMAND/UNIT <i>(Authorized abbreviation of military installation or command.)</i>
		10. UIC

11. PERSONAL HEARING PROTECTION

RIGHT EAR	a. MANUFACTURER	b. MODEL	c. SIZE <small>(S - Small, M - Medium, L - Large, C - Customized)</small>	d. PERSONAL ATTENUATION RATING (PAR)						e. COMBINED PAR	
				125 Hz	250 Hz	500 Hz	1000 Hz	2000 Hz	4000 Hz		8000 Hz
LEFT EAR											
BI-NAURAL											

f. REASON FOR HP FIT-TEST (Check the appropriate box):

<input type="checkbox"/> INITIAL ENTRY INTO HEARING CONSERVATION PROGRAM	<input type="checkbox"/> POST-TTS, PTS, OR STS
<input type="checkbox"/> REQUESTED BY INDIVIDUAL	<input type="checkbox"/> ALTERNATIVE HEARING PROTECTION DEVICE
<input type="checkbox"/> OTHER (Specify) _____	

g. EXPLANATION OF PAR

(1) Using the same fit technique will increase the probability of achieving similar PAR.
 (2) The PAR is applicable to the hearing protection devices (HPDs) tested. Different HPDs may produce a different PAR.

12. HEARING PROTECTION FIT-TEST SYSTEM

a. MANUFACTURER	b. MODEL	c. SERIAL NUMBER	d. LAST CALIBRATION DATE (YYYYMMDD)
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13. HEARING PROTECTION FIT-TEST OPERATOR

a. NAME