

# CLEANING TRAINING CHECKLIST

## FITNESS CENTERS & GYMS

**HOW TO USE:** Fill in the "Products & Dilution" and "Frequency" columns with your facility's specific products and schedules. Use Pass/Fail criteria to train staff on quality standards. Staff should initial each area when complete.

Cleaning Area	Task Steps & PPE	Products & Dilution (Fill In)	Frequency (Fill In)	Pass/Fail Criteria	Initial
Weight Equipment	1. Wipe machine handles & grips 2. Disinfect benches 3. Sanitize free weight handles 4. Clean touchscreens <b>PPE:</b> Gloves	Disinfecting wipes: _____  Equipment-safe spray: _____  Microfiber towels: _____	<input type="radio"/> Between every user <input type="radio"/> Wipe stations checked hourly <input type="radio"/> Other: _____	<b>PASS:</b> Equipment dry within 30 sec, no residue, wipe stations >80% stocked  <b>FAIL:</b> Wet equipment, sticky residue, empty dispensers	
Cardio Machines	1. Clean console & touchscreen 2. Disinfect handrails 3. Wipe bike seat & handlebars 4. Clean floor mats beneath equipment <b>PPE:</b> Gloves	Electronics-safe wipes: _____  All-purpose spray: _____  Floor cleaner: _____	<input type="radio"/> Spot clean every 2 hours during peak <input type="radio"/> Deep clean nightly <input type="radio"/> Other: _____	<b>PASS:</b> Consoles streak-free & responsive, handrails tacky-free, mats sweat-free  <b>FAIL:</b> Sticky consoles, greasy handrails, dirty mats	
Locker Rooms	1. Scrub shower stalls & tile 2. Disinfect benches 3. Wipe locker handles 4. Mop floors & clear drains 5. Clean mirrors <b>PPE:</b> Gloves, non-slip shoes, safety glasses	Tile/grout cleaner: _____  Disinfectant: _____  Glass cleaner: _____  Floor cleaner: _____  Drain cleaner: _____	<input type="radio"/> Hourly touchpoints <input type="radio"/> Deep scrub 2x/day (AM/PM) <input type="radio"/> Other: _____	<b>PASS:</b> No mildew odor, benches sanitized, mirrors clear, drains flowing, floors dry  <b>FAIL:</b> Musty smell, water spots, clogged drains, standing water	
Group Fitness Studios	1. Sanitize yoga mats 2. Clean mirrors 3. Mop floors 4. Disinfect props (blocks, straps) 5. Air out room <b>PPE:</b> Gloves	Mat cleaner: _____  Glass cleaner: _____  Floor cleaner: _____  Equipment spray: _____	<input type="radio"/> Between every class (30-min turnover) <input type="radio"/> Floors daily <input type="radio"/> Other: _____	<b>PASS:</b> Mats dry & odor-free, mirrors spotless, floors clean without slip hazard, room ready 5 min before class  <b>FAIL:</b> Wet mats, streaky mirrors, slippery floors, late setup	
Rubber Floors & Mats	1. Lift mats & clean underneath 2. Mop rubber flooring 3. Sanitize equipment mats 4. Check drainage areas 5. Apply deodorizer if needed <b>PPE:</b> Gloves, non-slip shoes	Rubber-safe cleaner: _____  Microfiber mop: _____  Scrub brush: _____  Wet vacuum: _____	<input type="radio"/> Daily mopping <input type="radio"/> Deep scrub weekly <input type="radio"/> Spot clean spills immediately <input type="radio"/> Other: _____	<b>PASS:</b> No pooling water, mats lay flat & clean, no odor, equipment mats dry  <b>FAIL:</b> Standing water, rolled mats, rubber smell, wet equipment areas	

### Supervisor Review

Areas Requiring Rework: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Coaching Notes: \_\_\_\_\_

Date/Time: \_\_\_\_\_

# CLEANING TRAINING CHECKLIST

## HEALTHCARE & CLINICS

**IMPORTANT:** Healthcare cleaning requires strict adherence to infection control protocols. Always verify EPA-registered disinfectants meet facility requirements and follow manufacturer contact times. Document all cleaning for compliance audits.

Facility Name: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Date: \_\_\_\_\_ Shift: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Cleaning Area	Task Steps & PPE	Products & Dilution (Fill In)	Frequency (Fill In)	Pass/Fail Criteria	Initial
Patient Rooms	1. Apply disinfectant to bed rails (observe dwell time) 2. Sanitize over-bed table 3. Disinfect call button 4. Wipe IV pole & equipment 5. Mop floor (clean to dirty) <b>PPE:</b> Gloves, gown if isolation, safety glasses	EPA-registered disinfectant: _____  Microfiber system: _____  Mop with disposable heads: _____	<input type="radio"/> Terminal clean between patients <input type="radio"/> Occupied rooms: 3x/day touchpoints <input type="radio"/> Other: _____	<b>PASS:</b> All surfaces visibly clean, EPA contact time documented, no missed areas, log signed  <b>FAIL:</b> Visible soil, contact time not met, missing surfaces, no documentation	
PPE Protocols	1. Don gloves before entering 2. Apply gown for isolation rooms 3. Use eye protection 4. Perform hand hygiene before/after 5. Dispose in correct receptacles <b>PPE:</b> Per room signage & protocol	Nitrile gloves: _____  Isolation gowns: _____  Safety glasses: _____  Hand sanitizer: _____  Biohazard bags: _____	<input type="radio"/> PPE change between every patient area <input type="radio"/> Hand hygiene every entry/exit <input type="radio"/> Other: _____	<b>PASS:</b> 100% compliance observed, no cross-contamination, proper disposal, hand hygiene performed  <b>FAIL:</b> Skipped PPE, cross-contamination risk, improper disposal	
Exam Rooms	1. Disinfect exam table & replace paper 2. Sanitize counters 3. Wipe medical equipment 4. Empty trash & sharps 5. Restock supplies <b>PPE:</b> Gloves, safety glasses	EPA-registered wipes: _____  Equipment cleaner: _____  Tablepaper: _____  Sharps container: _____	<input type="radio"/> Between every patient (5-10 min max) <input type="radio"/> Supply check 2x/shift <input type="radio"/> Other: _____	<b>PASS:</b> Room turnover <10 min, table paper replaced, equipment disinfected, supplies >80%, sharps <3/4 full  <b>FAIL:</b> Slow turnover, no paper change, missed equipment, low supplies	
ICU / High-Risk Areas	1. Disinfect monitoring equipment 2. Clean ventilator exterior 3. Sanitize IV pumps 4. Wipe crash cart handles 5. Document contact time <b>PPE:</b> Gloves, gown, safety glasses, mask per protocol	Hospital-grade disinfectant (EPA List N):  _____  Electronics-safe wipes: _____  Microfiber cloths: _____	<input type="radio"/> Hourly touchpoints <input type="radio"/> Terminal clean after procedures <input type="radio"/> Equipment after each use <input type="radio"/> Other: _____	<b>PASS:</b> All equipment disinfected, contact time verified & logged, visible cleanliness, audit >95%  <b>FAIL:</b> Missed equipment, no time documentation, failed audit	
Waiting Rooms	1. Wipe chairs & armrests 2. Disinfect door handles 3. Clean reception counter 4. Sanitize magazines/tablets 5. Empty trash <b>PPE:</b> Gloves	Disinfecting wipes: _____  All-purpose spray: _____  Glass cleaner: _____	<input type="radio"/> Every 2 hours during operating hours <input type="radio"/> Deep clean at close <input type="radio"/> Other: _____	<b>PASS:</b> All touchpoints disinfected, no visible soil, trash <3/4 full, area presentable  <b>FAIL:</b> Dirty chairs, sticky surfaces, overflowing trash	

# CLEANING TRAINING CHECKLIST **HEALTHCARE & CLINICS** (CONT.)

## Supervisor Review & Compliance Documentation

Areas Requiring Rework:

**Contact Time Verification:**  All contact times met and documented

Coaching Notes:

Supervisor Signature: \_\_\_\_\_ Date/Time: \_\_\_\_\_

# CLEANING TRAINING CHECKLIST

## FOOD SERVICE & CAFETERIA

**FOOD SAFETY:** All food-contact surfaces require food-safe sanitizers at 50-200 ppm concentration. Verify with test strips before each use. Follow FDA Food Code requirements for your jurisdiction.

Facility Name: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Date: \_\_\_\_\_ Shift: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Cleaning Area	Task Steps & PPE	Products & Dilution (Fill In)	Frequency (Fill In)	Pass/Fail Criteria	Initial
Prep Surfaces	1. Clean surface (remove food debris) 2. Apply sanitizer (50-200 ppm) 3. Wait contact time (30-60 sec) 4. Test with strips 5. Use color-coded boards <b>PPE:</b> Gloves, apron	Food-safe sanitizer: _____ Test strips (50-200 ppm): _____ Color-coded cutting boards: _____	<input type="radio"/> Between food types <input type="radio"/> Every 4 hours minimum <input type="radio"/> After raw meat/poultry <input type="radio"/> Other: _____	<b>PASS:</b> Test strip 50-200 ppm, surfaces visibly clean, correct board color used, logs complete <b>FAIL:</b> Failed test strip, visible debris, wrong board color	
Cooking Equipment	1. Disassemble equipment (slicer, mixer) 2. Scrub all parts 3. Sanitize & air dry 4. Reassemble correctly 5. Clean exterior surfaces <b>PPE:</b> Gloves, cut-resistant gloves for blades, safety glasses	Degreaser: _____ Equipment cleaner: _____ Sanitizer: _____ Scrub brushes: _____	<input type="radio"/> Daily after service <input type="radio"/> Slicers after each use <input type="radio"/> Deep clean per schedule <input type="radio"/> Other: _____	<b>PASS:</b> Equipment passes white-glove test, all parts reassembled, no grease buildup, air-dried <b>FAIL:</b> Greasy surfaces, missing parts, improper assembly	
Dining Tables	1. Remove dishes & debris 2. Wipe with cleaning solution 3. Apply food-safe sanitizer 4. Wipe dry (no standing liquid) 5. Clean chairs <b>PPE:</b> Gloves	Food-safe sanitizer: _____ Microfiber towels: _____ Spray bottles: _____	<input type="radio"/> Between every seating <input type="radio"/> Full wipe between meal periods <input type="radio"/> Other: _____	<b>PASS:</b> Tables sanitized & dry <2 min, no crumbs, chairs clean, ready for next guests <b>FAIL:</b> Wet tables, crumbs remain, slow turnover	
Dishwashing Station	1. Scrape & pre-rinse dishes 2. Load dish machine properly 3. Verify water temp (180°F rinse or 110°F + sanitizer) 4. Check chemical levels 5. Air dry (no towel wiping) <b>PPE:</b> Gloves, apron, non-slip shoes	Dish detergent: _____ Rinse aid: _____ Sanitizer: _____ Thermometer: _____ Test strips: _____	<input type="radio"/> Continuous during service <input type="radio"/> Temp check every 4 hours <input type="radio"/> Chemical check 2x/shift <input type="radio"/> Other: _____	<b>PASS:</b> Water temp logs complete, dishes air-dried, sanitizer concentration verified, machine cleaned <b>FAIL:</b> No temp logs, towel-dried dishes, failed sanitizer test	
Cross-Contamination Prevention	1. Use correct color-coded tools (red=meat, yellow=poultry, green=produce) 2. Wash hands 20 sec between tasks 3. Change gloves between food types 4. Separate cutting boards 5. Check allergen protocols <b>PPE:</b> Color-coded gloves per food type	Color-coded system: _____ Hand soap: _____ Gloves: _____ Allergen signage: _____	<input type="radio"/> Tool change between food types <input type="radio"/> Handwashing after raw food, trash, face touching <input type="radio"/> Other: _____	<b>PASS:</b> Zero cross-contamination incidents, correct tool colors observed, handwashing logged, allergen awareness verified <b>FAIL:</b> Wrong tool color, skipped handwashing, allergen mixup	

# CLEANING TRAINING CHECKLIST **FOOD SERVICE & CAFETERIA** (CONT.)

## Temperature & Sanitizer Log

Dishwasher Temp (180°F min): \_\_\_\_\_ Time: \_\_\_\_\_ Sanitizer ppm: \_\_\_\_\_ Time: \_\_\_\_\_

Dishwasher Temp (180°F min): \_\_\_\_\_ Time: \_\_\_\_\_ Sanitizer ppm: \_\_\_\_\_ Time: \_\_\_\_\_

## Supervisor Review

Areas Requiring Rework:

Coaching Notes:

Supervisor Signature: \_\_\_\_\_

Date/Time: \_\_\_\_\_

# CLEANING TRAINING CHECKLIST

## HOTELS & HOSPITALITY

**HOW TO USE:** Fill in the "Products & Dilution" and "Frequency" columns with your property's specific products and schedules. Use Pass/Fail criteria to train staff on quality standards. Staff should initial each area when complete.

Facility Name: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Date: \_\_\_\_\_ Shift: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Cleaning Area	Task Steps & PPE	Products & Dilution (Fill In)	Frequency (Fill In)	Pass/Fail Criteria	Initial
Guest Rooms	1. Strip & remake bed with fresh linens 2. Dust all surfaces 3. Disinfect high-touch points (remotes, switches, phone) 4. Clean & restock bathroom 5. Vacuum carpet/mop floors 6. Restock amenities <b>PPE:</b> Gloves	All-purpose cleaner: _____ Disinfecting wipes: _____ Glass cleaner: _____ Vacuum/mop: _____	<input type="radio"/> Between every guest checkout <input type="radio"/> Stay-over: Daily or per request <input type="radio"/> Other: _____	<b>PASS:</b> Bed hospital-corner crisp, no dust, all touchpoints disinfected, bathroom spotless, amenities full, no hair/debris <b>FAIL:</b> Wrinkled sheets, dusty surfaces, missed touchpoints, low amenities	
Bathrooms (Guest Rooms)	1. Spray & scrub toilet/tub/shower 2. Polish sink & fixtures 3. Clean mirrors (streak-free) 4. Mop floor 5. Replace towels & bath mat 6. Restock toiletries & paper <b>PPE:</b> Gloves, safety glasses	Toilet bowl cleaner: _____ Tile/tub cleaner: _____ Glass cleaner: _____ Disinfectant: _____ Floor cleaner: _____	<input type="radio"/> Every checkout <input type="radio"/> Stay-over: Daily <input type="radio"/> Other: _____	<b>PASS:</b> No soap scum, fixtures shiny, mirrors streak-free, floors dry, towels folded per standard, toiletries >75% <b>FAIL:</b> Soap residue, water spots, streaky mirrors, hair in drain	
Lobby & Common Areas	1. Dust furniture & decor 2. Wipe down seating 3. Clean glass doors & windows 4. Vacuum/mop floors 5. Empty trash 6. Straighten magazines/brochures <b>PPE:</b> Gloves	Furniture polish: _____ All-purpose cleaner: _____ Glass cleaner: _____ Vacuum/mop: _____	<input type="radio"/> 3x/day minimum (AM, midday, PM) <input type="radio"/> High-traffic: Hourly touch-ups <input type="radio"/> Other: _____	<b>PASS:</b> Furniture dust-free, seating clean, glass streak-free, floors spotless, trash <3/4 full, area inviting <b>FAIL:</b> Dusty surfaces, dirty seating, streaky glass, debris on floors	
Public Restrooms	1. Disinfect toilets/urinals (observe dwell time) 2. Scrub sinks & polish fixtures 3. Clean mirrors 4. Mop floors with disinfectant 5. Restock paper & soap 6. Empty trash & sanitize bins <b>PPE:</b> Gloves, safety glasses	Toilet disinfectant: _____ All-purpose cleaner: _____ Glass cleaner: _____ Floor disinfectant: _____ Odor control: _____	<input type="radio"/> Every 2 hours during operating hours <input type="radio"/> Deep clean 2x/day (AM/PM) <input type="radio"/> Other: _____	<b>PASS:</b> No odor, fixtures shiny, mirrors clear, floors dry, soap >80%, paper stocked, trash emptied <b>FAIL:</b> Odor present, water spots, empty dispensers, overflowing trash	

# CLEANING TRAINING CHECKLIST HOTELS & HOSPITALITY (CONT.)

Cleaning Area	Task Steps & PPE	Products & Dilution (Fill In)	Frequency (Fill In)	Pass/Fail Criteria	Initial
Fitness Center & Pool Area	1. Wipe down equipment 2. Disinfect locker room benches 3. Clean pool deck & furniture 4. Mop wet areas 5. Restock towels 6. Empty trash <b>PPE:</b> Gloves, non-slip shoes	Equipment wipes: _____ Disinfectant: _____ Outdoor furniture cleaner: _____ Floor cleaner: _____	<input type="radio"/> Equipment: Every 2 hours <input type="radio"/> Locker rooms: 3x/day <input type="radio"/> Pool deck: 2x/day & as needed <input type="radio"/> Other: _____	<b>PASS:</b> Equipment clean, benches disinfected, deck free of debris, wet areas mopped, towels >75% stocked <b>FAIL:</b> Dirty equipment, debris on deck, low towel supply, standing water	
Dining Areas & Breakfast Service	1. Wipe tables & chairs between guests 2. Clean buffet surfaces & sneeze guards 3. Restock coffee, utensils, condiments 4. Sweep/mop floors 5. Empty bus tubs & trash <b>PPE:</b> Gloves, apron	Food-safe sanitizer: _____ Glass cleaner: _____ All-purpose cleaner: _____ Floor cleaner: _____	<input type="radio"/> Between seatings <input type="radio"/> Full clean after breakfast service <input type="radio"/> Spot clean throughout <input type="radio"/> Other: _____	<b>PASS:</b> Tables sanitized & dry, buffet clean, supplies >75%, floors clean, no food debris <b>FAIL:</b> Sticky tables, empty supplies, food on floor, dirty buffet	

## Supervisor Review

Rooms Inspected: \_\_\_\_\_ Rooms Passed: \_\_\_\_\_ Rooms Requiring Rework: \_\_\_\_\_

Areas Requiring Rework:

Coaching Notes:

Supervisor Signature: \_\_\_\_\_ Date/Time: \_\_\_\_\_

# CLEANING TRAINING CHECKLIST

## OFFICE & CORPORATE SPACES

**HOW TO USE:** Fill in the "Products & Dilution" and "Frequency" columns with your facility's specific products and schedules. Use Pass/Fail criteria to train staff on quality standards. Staff should initial each area when complete.

Facility Name: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Date: \_\_\_\_\_ Shift: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Cleaning Area	Task Steps & PPE	Products & Dilution (Fill In)	Frequency (Fill In)	Pass/Fail Criteria	Initial
Workstations	1. Dust surfaces top-to-bottom 2. Wipe keyboards & mice 3. Clean monitors 4. Organize cables <b>PPE:</b> Gloves	Disinfecting wipes: _____  Microfiber cloths: _____  Electronics cleaner: _____	<input type="radio"/> Daily <input type="radio"/> 2x/day <input type="radio"/> Other: _____	<b>PASS:</b> No dust, monitors streak-free, keyboards clean, wipes >75% stocked  <b>FAIL:</b> Visible dust, sticky residue, empty dispensers	
Restrooms	1. Apply disinfectant (observe dwell time) 2. Scrub & rinse fixtures 3. Clean mirrors & sinks 4. Mop floors (clean to dirty) 5. Restock supplies <b>PPE:</b> Gloves, safety glasses	Toilet bowl cleaner: _____  All-purpose disinfectant: _____  Glass cleaner: _____  Floor cleaner: _____	<input type="radio"/> 2x/day <input type="radio"/> 3x/day <input type="radio"/> Other: _____	<b>PASS:</b> No odor, fixtures shiny, floors dry, paper >75%, soap >75%  <b>FAIL:</b> Odor present, water spots, empty dispensers	
Breakrooms	1. Wipe appliance exteriors & handles 2. Clean microwave interior 3. Sanitize tables & counters 4. Scrub sink 5. Empty trash <b>PPE:</b> Gloves	Food-safe sanitizer: _____  Degreaser: _____  All-purpose cleaner: _____	<input type="radio"/> After meals <input type="radio"/> Deep clean EOD <input type="radio"/> Other: _____	<b>PASS:</b> No food residue, appliances clean, sink spotless, trash emptied  <b>FAIL:</b> Crumbs on tables, greasy microwave, full trash	
Floors (Hard Surface)	1. Sweep or vacuum debris 2. Spot clean spills immediately 3. Mop with proper solution 4. Clean edges & corners <b>PPE:</b> Non-slip shoes	Vacuum/broom: _____  Floor cleaner: _____  Microfiber mop: _____	<input type="radio"/> Sweep: Daily <input type="radio"/> Mop: Daily <input type="radio"/> Other: _____	<b>PASS:</b> No debris, edges clean, uniform shine, no residue or slip hazard  <b>FAIL:</b> Debris in corners, streaks, sticky floors	
Floors (Carpet)	1. Vacuum with overlapping passes 2. Use crevice tool on edges 3. Spot treat stains immediately 4. Empty vacuum bag/canister <b>PPE:</b> None unless chemicals used	Vacuum: _____  Spot cleaner: _____  Carpet stain remover: _____	<input type="radio"/> Daily vacuum <input type="radio"/> Spot clean as needed <input type="radio"/> Deep clean quarterly	<b>PASS:</b> No visible debris, uniform appearance, stains treated, vacuum emptied  <b>FAIL:</b> Debris visible, missed corners, full vacuum bag	
Trash & Recycling	1. Remove liners without spillage 2. Wipe bin interior & exterior 3. Replace liners 4. Verify recycling sorting 5. Restock extra liners <b>PPE:</b> Gloves	Disinfectant spray: _____  Trash bags: _____  Recycling labels: _____	<input type="radio"/> Empty at 3/4 full <input type="radio"/> Sanitize bins weekly <input type="radio"/> Other: _____	<b>PASS:</b> No overflowing, liners fit properly, sorting correct, extras stocked  <b>FAIL:</b> Overflowing bins, torn liners, mixed waste	

# CLEANING TRAINING CHECKLIST **OFFICE & CORPORATE SPACES** (CONT.)

## Supervisor Review

Areas Requiring Rework:

Coaching Notes:

Supervisor Signature: \_\_\_\_\_

Date/Time: \_\_\_\_\_

# CLEANING TRAINING CHECKLIST

## SCHOOLS & EDUCATIONAL FACILITIES

**HOW TO USE:** Fill in the "Products & Dilution" and "Frequency" columns with your facility's specific products and schedules. Use Pass/Fail criteria to train staff on quality standards. Staff should initial each area when complete.

Facility Name: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Date: \_\_\_\_\_ Shift: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Cleaning Area	Task Steps & PPE	Products & Dilution (Fill In)	Frequency (Fill In)	Pass/Fail Criteria	Initial
Classrooms	1. Disinfect desks & chairs 2. Clean whiteboard 3. Sanitize door handles 4. Spot sweep high-traffic areas <b>PPE:</b> Gloves	Disinfecting wipes: _____ Whiteboard cleaner: _____ All-purpose spray: _____	<input type="radio"/> Between classes: 15 min <input type="radio"/> Deep clean after school <input type="radio"/> Other: _____	<b>PASS:</b> All desks disinfected within 15 min, whiteboard clear, no floor debris <b>FAIL:</b> Missed desks, whiteboard residue, visible dirt	
Cafeteria	1. Sanitize tables (food-safe solution) 2. Wipe chairs 3. Clean trays & utensils 4. Mop floors 5. Restock condiments <b>PPE:</b> Gloves, non-slip shoes	Food-safe sanitizer: _____ (50-200 ppm) Degreaser: _____ Floor cleaner: _____	<input type="radio"/> Between lunch periods: 30 min <input type="radio"/> Deep clean after last lunch <input type="radio"/> Other: _____	<b>PASS:</b> Tables dry & sanitized, no food debris, condiments >75%, test strip 50-200 ppm <b>FAIL:</b> Sticky tables, floor debris, empty stations	
Restrooms (High-Traffic)	1. Rapid toilet/urinal cleaning 2. Polish fixtures 3. Clean mirrors 4. Mop floors 5. Restock paper & soap <b>PPE:</b> Gloves, safety glasses	Toilet disinfectant: _____ All-purpose cleaner: _____ Glass cleaner: _____ Odor control: _____	<input type="radio"/> 3x/day minimum <input type="radio"/> AM, lunch, PM <input type="radio"/> Spot check between <input type="radio"/> Other: _____	<b>PASS:</b> No odor, fixtures spotless, floors dry, soap >80%, paper stocked <b>FAIL:</b> Odor, water spots, empty dispensers	
Gym & Locker Rooms	1. Wipe equipment handles 2. Sanitize benches 3. Clean showers/stalls 4. Disinfect locker handles 5. Mop floors <b>PPE:</b> Gloves, non-slip shoes	Disinfecting wipes: _____ Shower/tile cleaner: _____ Floor disinfectant: _____ Deodorizer: _____	<input type="radio"/> Between PE classes <input type="radio"/> Deep clean EOD <input type="radio"/> Locker rooms 2x/day <input type="radio"/> Other: _____	<b>PASS:</b> Equipment dry, benches sanitized, no mildew smell, floors clean <b>FAIL:</b> Wet equipment, musty odor, standing water	
Hallways & Commons	1. Dust mop or sweep 2. Spot mop spills 3. Wipe handrails 4. Empty trash cans 5. Clean glass doors <b>PPE:</b> Gloves, safety vest if needed	Dust mop or broom: _____ All-purpose cleaner: _____ Glass cleaner: _____	<input type="radio"/> Sweep: 2x/day <input type="radio"/> Spot clean as needed <input type="radio"/> Deep mop after school <input type="radio"/> Other: _____	<b>PASS:</b> No debris, handrails clean, glass streak-free, trash <3/4 full <b>FAIL:</b> Visible debris, dirty handrails, overflowing trash	

# CLEANING TRAINING CHECKLIST OFFICE & CORPORATE SPACES (CONT.)

Cleaning Area	Task Steps & PPE	Products & Dilution (Fill In)	Frequency (Fill In)	Pass/Fail Criteria	Initial
Playground Equipment	1. Wipe slide/swing handles 2. Clean water fountains 3. Sanitize benches 4. Empty trash cans 5. Remove ground debris <b>PPE:</b> Gloves, sun protection	Outdoor-safe disinfectant: _____ Wipes: _____ Trash bags: _____	<input type="radio"/> Daily after recess <input type="radio"/> Fountains: 2x/day <input type="radio"/> Other: _____	<b>PASS:</b> Handles clean & dry, fountains sanitized, no trash overflow, debris removed <b>FAIL:</b> Sticky handles, dirty fountains, full trash	

## Supervisor Review

Areas Requiring Rework:

Coaching Notes:

Supervisor Signature: \_\_\_\_\_

Date/Time: \_\_\_\_\_