**Appendix 2 - Baseline Noise Measurement Form**

School/Department:

Conducted by: Date:

Noise meter used: (brand & model)

Last calibrated: Next calibration:

Location: (sketch or attach the room layout plan and indicate the location or point(s) measured).

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**Measured Readings**

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| --- | --- | --- | --- | --- | --- |
| **Location or Point** | **Measured sound level in dB(A)** | **Duration of Exposure (Minutes)** | **Frequency of Exposure (Times per day)** | **Total duration per day** | **Further action needed (Y/N), state action if Yes** |
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*Note: Next monitoring to be carried out within the next 12 months for noise level at 80dBA and above.*

**Conclusion**

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