



Waste Audit Worksheet

Date: _____

School/Centre: _____ Elementary Secondary # of students/occupants: _____

Main contact: _____ Phone: _____ Email: _____

Names and roles of auditing team members: _____

Waste category	Recyclable containers (plastic, metal, glass, paper milk/juice cartons)	Recyclable paper (e.g., copy paper, newspapers, notebooks, magazines)	Other recyclables (e.g., e-waste, printer/toner cartridges, CFL bulbs, batteries)	Food waste and soiled papers (e.g., fruit peels, paper towels, plates, cups)	Real garbage (must go to landfill)	Overall total
Total weight by category (in kg)						
Percentage by category						100%
Observations/ Suggestions						