## Worker Orientation CHECKLIST

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | Employee name: | | | | | |
|  | | Position (tasks): | | | | | |
| Date hired or transferred: | | | |  | Date of orientation: | | |
| Person providing orientation: | | | |  | Phone number: | | |
| **Check** | **Subject** | | | | | **Trainer initials** | **Worker initials** |
|  | Supervisor’s name and contact information | | | | |  |  |
|  | Review company OHS Policy and OHS Program | | | | |  |  |
|  | Hazards – how and who to report unsafe practices or conditions to | | | | |  |  |
|  | Injuries – how and who to report them to | | | | |  |  |
|  | General safe work practices rules:  *(List specific procedures. For each procedure: explain, demonstrate, and have worker demonstrate it back to you.)* | | | | |  |  |
|  |  | | *Name specific task and safe work procedure 1 :* | | |  |  |
|  |  | | *Name specific task and safe work procedure 2 :* | | |  |  |
|  |  | | *Name specific task and safe work procedure 3 :* | | |  |  |
|  |  | | *Name specific task and safe work procedure 4 :* | | |  |  |
|  | Equipment – how to safely use, maintain, and clean  *(Include a list of specific equipment workers will use.)* | | | | |  |  |
|  |  | | *Name specific equipment 1:* | | |  |  |
|  |  | | *Name specific equipment 2:* | | |  |  |
|  | Personal Protective Equipment (PPE) –  what PPE the worker must use, where to get it, how to use it, how to clean, maintain, and store it. *(Include a list of specific PPE your workers must use and check off orientation as it applies)* | | | | |  |  |
|  | WHMIS – *General training. Include specific training for all hazardous materials in the workplace.* | | | | |  |  |
|  | Emergency procedures – where to find the emergency procedures | | | | |  |  |
|  | | Locations of emergency exits and muster points | | |  |  |
|  | | Locations of fire extinguishers and fire alarms | | |  |  |
|  | | How to use fire extinguishers | | |  |  |
|  | | What to do in an emergency situation | | |  |  |
|  | | How to report the emergency and to whom | | |  |  |
|  | | Emergency contact numbers | | |  |  |
|  | First Aid | | | | |  |  |
|  | | Who the designated first aider in the workplace is | | |  |  |
|  | | Location(s) of first aid kit(s) and eye wash facilities | | |  |  |
|  | | First Aid log book | | |  |  |
|  | Hazards and control measures *(include procedures for all hazards)* | | | | |  |  |
|  | | Working Alone Procedures – who to contact, how to contact them, and how often | | |  |  |
|  | | Violence and harassment procedures | | |  |  |