

# SAFETY ORIENTATION CHECKLIST

Employee's Name: \_\_\_\_\_

Position: \_\_\_\_\_

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

Department/Program: \_\_\_\_\_

Location: \_\_\_\_\_

**Supervisor:** These actions should be completed during the first week or as soon as possible after the employee commences. Tick off each action and sign when all actions have been completed. Please retain this checklist and provided a copy to the employee.

**Employee:** You should sign the form where indicated when you are satisfied that the items have been completed.

**1. General safety information provided and discussed:**

College occupational health and safety policies and procedures Ensure that adequate discussion of relevant parts including: <ul style="list-style-type: none"> <li>• Health and Safety Website</li> <li>• College Smoking policy</li> <li>• Incident/injury notification process</li> <li>• Report all safety concerns to Supervisor ASAP</li> <li>• Security x4444 for all emergencies - 911 for life threatening</li> <li>• Emergency Preparedness Website - Fleming safe App</li> </ul>	
Employee assistance program (full time employees only)	
College occupational health & safety policies/procedures. – Website	
Staff, students and others working at off College work sites (such as businesses, camps, etc.) Arrange site specific safety orientation that complements the established safe working procedures for that site.	

**2. Emergency Procedures:**

Provide and explain the Emergency Procedures for fire, evacuation, lock downs and other events. (College website)	
Show locations and discuss use of fire extinguishers.	
Show means of escape from building and assembly locations.	
Show location and use of other emergency equipment.	
Show location of First Aid kits. (advise location of nurses station)	

**3. Important contact names for department/location. Introduce and discuss, where Applicable, the safety roles and responsibilities of the:**

Designation	Name	Ext.
Instructor/Supervisor		
Academic Team Leader		
Facilities Manager		
Security		
College Nurse		

**4. Specific workplace procedures and requirements:**

Discuss specific workplace hazards and procedures to be followed, including: <ul style="list-style-type: none"> <li>• safety training (safety video)/WHIMIS training</li> <li>• labs and workshops - Inc. hazardous substances requirements</li> <li>• machinery and equipment - discuss/demonstrate safe working procedures</li> <li>• use of vehicles - including extended driving and in remote locations</li> <li>• waste disposal procedures</li> </ul>	
Provide and discuss proper use and care of personal protective equipment.	
Assist in obtaining any necessary certificates, permits, licenses or other qualifications as required.	

**5. Follow up actions such as further information, instruction, equipment or training required:**

Action	By Whom	By When

Supervisor's Signature \_\_\_\_\_  
(Hiring Leader/Manager)

Date \_\_\_\_\_

Employee's Signature \_\_\_\_\_

Date \_\_\_\_\_

Comments \_\_\_\_\_  
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