

SUPERVISOR'S CHECKLIST FOR NEW EMPLOYEE ORIENTATION

Employee _____ Date Employed _____

Supervisor _____ Department _____

I. Conditions of Employment

- | | |
|--|---|
| <input type="checkbox"/> Job Duties | <input type="checkbox"/> Time Cards |
| <input type="checkbox"/> Pay Rates and Increases | <input type="checkbox"/> Attendance & Punctuality |
| <input type="checkbox"/> Work Standards | <input type="checkbox"/> Reporting Absences |
| <input type="checkbox"/> Performance Reviews | <input type="checkbox"/> Use of Telephone |
| <input type="checkbox"/> Hours of Work | <input type="checkbox"/> Injury/Illness Reporting |
| <input type="checkbox"/> Lunch Hours | <input type="checkbox"/> Holiday/Vacation |
| <input type="checkbox"/> Break Periods | <input type="checkbox"/> Supervisor's Safety Orientation Checklist (on reverse) |
| <input type="checkbox"/> Drug-Free Workplace | <input type="checkbox"/> Sexual Harassment |
| <input type="checkbox"/> Workplace Violence | |

II. Facilities and Human Resources

- | | |
|---|---|
| <input type="checkbox"/> Introduction to Fellow Employees | <input type="checkbox"/> First Aid Kit |
| <input type="checkbox"/> Shop Equipment | <input type="checkbox"/> Restrooms |
| <input type="checkbox"/> Tools and Supplies | <input type="checkbox"/> Eating Areas |
| <input type="checkbox"/> Safety Equipment | <input type="checkbox"/> Parking Areas |
| <input type="checkbox"/> Evacuation Route | <input type="checkbox"/> Payroll Information Form (return to Human Resources) |

I certify that information regarding the above items has been explained to me.

Employee Signature _____
Date

Orientation regarding these items was provided to the above-named employee.

Supervisor Signature _____
Date

Supervisor's Safety Orientation Checklist

- _____ General Safety Rules (page II-1 of Safety Manual)
REGULAR EMPLOYEES - sign and return with letter of offer
STUDENTS AND INTERMITTENT EMPLOYEES - keep signed copy with department files

- _____ Orientation to Safety Manual (where it is kept, employee access, etc.).

- _____ Training regarding specific hazards on the job; including workplace violence.

- _____ MSDS* Training (what they are, where they are kept, employee access, emergency procedures).

- _____ Emergency evacuation routes and procedures. Specific Department meeting areas.

- _____ Accident/injury/illness procedures. Notification of Supervisor. Medical treatment procedures, reporting requirements.

- _____ First Aid kits and Fire Extinguishers -- locations and use.

- _____ Safety concerns: Where and how to report concerns without fear of reprisal.

- _____ Automobile and forklift training (where applicable).

*Material Safety Data Sheets. Refer to Section VII -1 in the Safety Manual for more details.