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| **Employee Name:** | |
| **Position** *(tasks)***:** | |
| **Date Hired:** | **Date of Orientation:** |
| **Person Providing Orientation:** | |
| **Company Name:** | |

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| **Topic** | **Check Once Discussed** | **Notes** |
| 1. **Supervisor Name:**   **Telephone #:** |  |  |
| 1. **Rights and Responsibilities**  * General duties of employers, workers and supervisors * Worker right to refuse unsafe work * Worker responsibility to report hazards * Bullying and harassment |  |  |
| 1. **Workplace Health and Safety Rules** *(Specific to Workplace)* |  |  |
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| 1. **Known Hazards and How to Deal with Them** *(Specific to Workplace)* |  |  |
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| 1. **Safe Work Procedures** *(Specific to Workplace)* |  |  |
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| 1. **Procedure for Working Alone or in Isolation** |  |  |
| 1. **Measures to Reduce the Risk of Violence in the Workplace and Procedures for Dealing with Violent Situations** |  |  |
| 1. **Personal Protective Equipment (PPE)**  * What to use, when to use it, where to find it and how to care for it |  |  |
| 1. **First Aid**  * First Aid attendant’s name and contact information * Locations of First Aid kits and eye wash facilities * How to report an illness, injury or other incident |  |  |
| 1. **Emergency Procedures**  * Locations of emergency exits and meeting points * Locations of fire extinguishers and fire alarms * How to use fire extinguishers * What to do in an emergency situation |  |  |
| 1. **Where Applicable; Basic Contents of the Occupational Health and Safety Program** |  |  |
| 1. **Hazardous Materials and Workplace Hazardous Material Information System (WHMIS)**  * Hazardous materials in the workplace * Hazards of controlled product used by worker * Location, purpose and how to read Material Safety Data Sheets (MSDS) * How to handle, use, store and dispose of hazardous materials safely * Procedures for emergencies involving hazardous materials, including clean-­­up or spills |  |  |
| 1. **Where Applicable; Contact Information for the Occupational Health and Safety Committee or the Worker Health and Safety Representative** |  |  |
| 1. **Other Key Orientation Topics to Discuss as Applicable**  * Impairment Policy: incl. prescription & non-prescription drugs, alcohol, physical or mental impairment, and fatigue * Lockout * Lifting and moving objects * Guarding (tools and machinery) * Tractor, Forklift and other mobile equipment * Falls from elevation * Confined spaces |  |  |
| ***Use spaces on next page for additional site-specific orientation topics as needed. Sign each page.*** | | |

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| **Trainer Signature:** |  |
| **Worker Signature:** |  |

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| **Topic** | **Check Once Discussed** | **Notes** |
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| **Trainer Signature:** |  |
| **Worker Signature:** |  |