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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
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| 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**
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| 1. **Measures to Reduce the Risk of Violence in the Workplace and Procedures for Dealing with Violent Situations**
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| 1. **Personal Protective Equipment (PPE)**
* What to use, when to use it, where to find it and how to care for it
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| 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
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| 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
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| 1. **Where Applicable; Basic Contents of the Occupational Health and Safety Program**
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| 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
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| 1. **Where Applicable; Contact Information for the Occupational Health and Safety Committee or the Worker Health and Safety Representative**
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| 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
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| ***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:** |  |