

Sample Employee Safety Orientation Checklist

Employee's Name: _____ Hire Date: _____

Position: _____

Department/Location: _____

Person Completing Orientation: _____

Title: _____

1. EMPLOYEE SAFETY RULES

- _____ A. Provided copy of General Safety Rules
- _____ B. Provided copy of Progress Discipline Process
- _____ C. Provided copy of Area Safety Rules (if applicable)

2. UNSAFE CONDITIONS

- _____ A. Discussed examples of unsafe conditions
- _____ B. Discussed correction and/or reporting of unsafe conditions

3. LIFTING TECHNIQUES

- _____ A. Discussed common lifting/strain injury hazards
- _____ B. Discussed material-handling-equipment availability/use
- _____ C. Reviewed correct lifting techniques and guidelines

4. ACCIDENTS AND INCIDENTS

- _____ A. Reviewed accident-reporting requirements
- _____ B. Discussed incident and "near misses" reporting
- _____ C. Reviewed and discussed incident-reporting procedures

5. MEDICAL AID

- _____ A. Identified readily available first aid personnel
- _____ B. Reviewed location of emergency first aid materials
- _____ C. Discussed notifying supervisors of first aid injuries
- _____ D. Identified location of emergency eyewash station

6. EMERGENCY PROCEDURES

- _____ A. Identified location and use of emergency telephone numbers
- _____ B. Reviewed procedures for fire/medical emergencies
- _____ C. Discussed procedures for extreme weather and other emergencies

7. PERSONAL PROTECTIVE EQUIPMENT REQUIREMENTS (IF APPLICABLE)

- _____ A. Footwear
- _____ B. Eye protection
- _____ C. Gloves
- _____ D. Other _____

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8. DEPARTMENT AND AREA HOUSEKEEPING

- A. Discussed common problems/corrective measures
- B. Discussed materials storage areas and practices

9. FIRE PROTECTION AND PREVENTION

- A. Identified and discussed "No Smoking" areas
- B. Discussed location and use of fire extinguishers and fire alarms

10. HAZARD COMMUNICATION/RIGHT-TO-KNOW COMPLIANCE

- A. Discussed requirements of the law
- B. Discussed container labeling and MSDS information
- C. Identified hazardous materials used in the work area
- D. Conducted hazardous materials training
- E. Issued personal protective equipment _____

11. DRIVER SAFETY ORIENTATION (IF APPLICABLE)

- A. Completed personal driving record (MVR) check
- B. Provided/reviewed driver safety rules
- C. Conducted driver's vehicle orientation
- D. Reviewed vehicle inspection procedures
- E. Provided driver with accident information package

12. SUBSTANCE ABUSE

- A. Discussed the company's Drug & Alcohol Policy
- B. Provided a copy of the above policy
- C. Provided a copy of the Progress Discipline Process

13. OTHER SAFETY CONCERNS/INSTRUCTIONS

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- H. _____
- I. _____
- J. _____

Signed By Employee

Date