

Safety Orientation Checklist

Name: _____ Date: _____

I have read and understand the following Sections of Advantage Staffing, Safety Orientation/Policy and PPE Manual:

1. Company Safety Policy & Responsibility for Health & Safety

Initial _____

2. Responsibility for Health and Safety

Initial _____

3. Personal & Sexual harassment Policy

Initial _____

4. Violence in the Workplace

Initial _____

5. Zero Tolerance Policy

Initial _____

6. Reporting

- Supervision
- Correction of unsafe conditions/hazards

Initial _____

7. Hazards

Initial _____

8. Reporting

- First Aid
- Injury Reporting

Initial _____

9. Refusal of Unsafe Work
➤ Dangerous Work and Discriminatory Action

Initial _____

10. Injury and Modified Work Procedures

Initial _____

11. Disciplinary Policy

Initial _____

12. Back/Muscular Injury Prevention

Initial _____

13. P.P.E (Personal Protective Equipment)
➤ Head Protection , Foot Protection
➤ Appearance/Clothing, Hand Protection
➤ Head Protection, Foot Protection
➤ Hearing Protection/Conservation
➤ Eye Protection / Conservation
➤ Respiratory Code of Practice

Initial _____

14. Fall Protection
➤ Fall Protection Plans

Initial _____

15. W.H.M.I.S
➤ WHMIS
➤ Symbols
➤ MSDS
➤ Education

Initial _____

16. Emergency Preparedness

Initial _____

Disclaimer

All safety equipment required on site is the responsibility of the employee.

Safety Equipment is not an option. Every worker must wear all personal protective equipment required on site.

By signing the below signature line you agree to follow all rules and policies addressed in the Orientation/Policy and PPE Manual, and to follow all rules and regulations according to the OH&S Standards.

Signature of Employee

Date Signed