

New Worker Orientation Checklist



All employees and dependent contractors operating under your company's safety plan must review the following general areas **on their first day before they start work or when returning to work after an absence of longer than 6 weeks.**

Employee / Contractor Name: _____ Date: _____
 Supervisor/H&S rep name: _____ Supervisor/H&S rep contact: _____

Company Policies									
<input type="checkbox"/> Section 1 - Company Health and Safety Policies	<input type="checkbox"/> Section 1.1 – Forest Safety Accord								
<input type="checkbox"/> Section 1.3 - Safety Team members	<input type="checkbox"/> Section 1.4 - Job Roles and Responsibilities								
Review of Safety Policies and Procedures									
<input type="checkbox"/> Section 1.6 - Required safety meetings	<input type="checkbox"/> Section 2.2 / App. 3 - Hazard / close-call / incident reporting requirements and procedures								
<input type="checkbox"/> Section 1.5 – Covid 19 Prevention and Risks	<input type="checkbox"/> Section 2.1 – Field Safety Plans								
<input type="checkbox"/> Sections 1.7 - First Aid equipment and procedures	<input type="checkbox"/> Section 2.1.1 - Check-in procedures and field communications								
<input type="checkbox"/> Section 2.6 - PPE policy and requirements	<input type="checkbox"/> Section 2.3 – Emergency Response Plan (ERP) and procedures								
<input type="checkbox"/> Section 2.5 – Contractor Selection Policy	<input type="checkbox"/> Section 1.6.2 / App. 2 - Tailboard Meetings / Vehicle and Machinery Inspections/ Site and Worker Assessments								
<input type="checkbox"/> Section 1.6.1 / App. 1 - New Worker Orientations	<input type="checkbox"/> Section 1.7.1 - Worksite First Aid Requirements								
<input type="checkbox"/> Section 2.7 - WHMIS orientation and location of the Material Safety Data Sheets (MSDS)	<input type="checkbox"/> Section 2.8 - Records of Training								
<input type="checkbox"/> Training, certification & qualifications verified by the company (see record of training at https://github.com/NewGraphEnvironment/hsp/blob/master/data/training_log.csv) <ul style="list-style-type: none"> <input type="checkbox"/> OFA Level 1 <input type="checkbox"/> Class 5 Drivers License <input type="checkbox"/> Electrofishing <input type="checkbox"/> Swift Water Rescue <input type="checkbox"/> WHMIS <input type="checkbox"/> RPAS Pilot _____ (level) 	<input type="checkbox"/> Sections 3 - Safe work procedures (Check those reviewed). Shows that worker received instruction and demonstration of task or work process <table border="1" style="width: 100%;"> <tbody> <tr> <td><input type="checkbox"/> All-terrain vehicles</td> <td><input type="checkbox"/> Driving</td> </tr> <tr> <td><input type="checkbox"/> Culvert and habitat confirmation assessments</td> <td><input type="checkbox"/> Working alone</td> </tr> <tr> <td><input type="checkbox"/> Wildlife encounters</td> <td><input type="checkbox"/> Electrofishing</td> </tr> <tr> <td><input type="checkbox"/> Remote Working</td> <td></td> </tr> </tbody> </table>	<input type="checkbox"/> All-terrain vehicles	<input type="checkbox"/> Driving	<input type="checkbox"/> Culvert and habitat confirmation assessments	<input type="checkbox"/> Working alone	<input type="checkbox"/> Wildlife encounters	<input type="checkbox"/> Electrofishing	<input type="checkbox"/> Remote Working	
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Signature of Employee / Contractor: _____

Signature of Supervisor / Trainer: _____