



C-3 NEW EMPLOYEE SAFETY ORIENTATION

A – SAFETY ORIENTATION POWER POINT PRESENTATION

1. VISION, KEY VALUES, PRIORITIES _____
2. GENERAL RULES _____
3. HEALTH & SAFETY POLICY _____
4. SAFETY PROGRAM _____
5. HEALTH & SAFETY RESPONSIBILITIES _____
6. TRAINING & EDUCATION _____
7. INSPECTIONS _____
8. HAZARD ASSESSMENT _____
9. SAFE WORK PRACTICES/PROCEDURES _____
10. INCIDENT INVESTIGATION _____
11. FIRST AID _____
12. BACK CARE _____
13. PPE (Use & Care) _____
 - HARD HAT _____
 - STEEL TOED BOOTS _____
 - SAFETY GLASSES _____
 - HEARING PROTECTION _____
 - SAFETY VESTS _____
14. EMERGENCY PREPAREDNESS _____
15. LOG BOOKS, MAINTENANCE, RED TAG _____
 - TOOL POLICY _____
16. FIRE PREVENTION _____
17. SAFETY ENFORCEMENT _____
18. COR OVERVIEW _____

B– SUBMITTED DOCS (IF APPLICABLE):

1. FORKLIFT CERTIFICATE _____
2. DRIVERS LICENCE _____
3. FIRST AID CERTIFICATE _____
4. FALL PROTECTION _____
4. OTHER _____
5. OTHER _____

I, _____
have been familiarized with the Company Safety Program and I agree to comply with all policies, procedures, and practices outlines in the Company Safety Manual. I further agree to educate myself and abide by the OH&S Act, Code, and Regulation.

SIGN: _____

WITNESS: _____

HIRE DATE: _____

PLEASE RETURN TO HEALTH & SAFETY COORDINATOR WHEN ORIENTATION COMPLETED.