

Please complete this form during the employee's first week or as soon as possible after the employee commences.

When all action has been completed, retain this checklist within the work unit, and provide copies to the employee and HR Services.

Note: It is a legislative requirement that this form be completed as part of Southern Cross University's induction process.

Employee's Name: Staff ID:..... Phone:.....

Position Title: Work Unit:.....

1. EMERGENCY PROCEDURES *(please tick):*

- Explain building emergency procedure
- Show emergency exits and assembly location
- Show location & proper use of emergency equipment
- Show location of first aid kits/officers

2. SPECIFIC WORKPLACE PROCEDURES AND REQUIREMENTS *(where applicable):*

- Screen based equipment
- Laboratories & workshops
- Machinery & equipment
- Use of vehicles
- Waste disposal procedures
- Provide & discuss proper use & care of PPE where applicable
- WHS self assessment

3. SAFETY PERSONNEL DETAILS FOR THE WORK UNIT:

- Health & Safety Representative:
- Safety Support Officer:
- First Aid Officer:
- Emergency Warden:

4. FOLLOW-UP ACTIONS REQUIRED *(eg further information, instruction, additional equipment or training required):*

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By Whom: By When:

SIGNATURES

The above information has been provided. This checklist has been copied to the employee and HR Services:

Employee's signature: _____ Date:

Inductor's signature: _____ Date: