

# INDUCTION CHECKLIST

Worker's Name: .....

Employment Start Date: .....

Position / Job: .....

Manager / Supervisor: .....

Department: .....

Section: .....

## Explain your company:

- the structure
- the type of work

## List and introduce your key people and their roles:

- manager / owner
- supervisor
- co-workers
- employees' safety representative

## Explain their employment conditions:

- job description and responsibilities
- leave entitlements
- notification of sick leave or absences
- out of hours enquiries and emergency procedures
- time recording procedures
- work times and meal breaks

## Explain their pay:

- name of award or agreement (if relevant) and award conditions
- pay arrangements
- rates of pay and allowances
- superannuation
- taxation and any other deductions (including completing the required forms)
- union membership and award conditions

## Explain your workplace health and safety:

- consultative and communication processes, including the employees' safety representative
- incident reporting procedures, including where to find reporting forms
- policy and procedures
- roles and responsibilities
- workers compensation claims process and rehabilitation

## Show your work environment:

- car parking
- eating facilities
- locker and change rooms
- phone calls and message collecting system
- wash and toilet facilities
- work station, tools, machinery and equipment used for job

**Explain your policies and procedures on:**

- equal employment opportunity
- quality management
- sexual harassment
- violence and bullying
- drug and alcohol misuse

**Show your workplace health and safety environment:**

- emergency procedures, exits and fire extinguishers
- first aid facilities such as the first aid kit and room
- information on workplace hazards and controls
- safe use and storage of hazardous substances, including material safety data sheets
- safe use and storage of personal protective equipment

**Conduct a follow-up review:**

- answer and ask questions
- repeat any training required or provide additional training if needed
- review work practices and procedures with the worker

**Explain your training:**

- first aid, fire safety and emergency procedures training
- hazard-specific training (eg manual handling, hazardous substances)
- on the job training in safe work procedures
- job-specific training (eg if a license or permit is required)

**Explain your security:**

- cash
- for each worker and for their personal belongings
- procedures for the workplace buildings

Conducted by – (Name): ..... Date:.....

Signature: ..... Date: .....

Position / Job: .....

Workers Signature: .....

Notes: .....

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