

Staff induction and training record

EMPLOYEE DETAILS

Full name:

Position:

Business/organisation:

HEALTH

Allergies and other existing health issues:

Medications:

HEALTH CHECKS

Doctor's name:

Practice name:

Date:

Staff induction and training record continued

INDUCTION

Details of the following have been explained, shown and understood:

Job role, responsibilities and tasks expected	Yes	No	N/A
Legal, Code of Conduct and QA obligations	Yes	No	N/A
Personal safety equipment (PPE) issued and instructions on use and cleaning	Yes	No	N/A
Main workplace hazards (equipment, chemicals, electrical, etc) and risk control procedures	Yes	No	N/A
Location of first aid kits, fire extinguishers and hoses, emergency shower, toilet etc	Yes	No	N/A
Emergency procedures: how to contact help, locations of phones, assembly area etc	Yes	No	N/A
How and where to access chemical Safety Data Sheets (SDSs)	Yes	No	N/A
How to report safety issues, equipment problems etc	Yes	No	N/A
How to operate equipment	Yes	No	N/A
Procedures for chemical handling, measuring etc	Yes	No	N/A
Location of chemical store and how to manage stored products	Yes	No	N/A
Procedure for dealing with a chemical spill	Yes	No	N/A
Procedures for disposal of waste chemical, empty containers and equipment wash down rinsate	Yes	No	N/A
Procedures for safely transporting chemical products	Yes	No	N/A
Location of relevant records and procedures for accurate completion	Yes	No	N/A

Induction conducted by:

Employee signature:

Date:

QUALIFICATIONS, TRAINING, SKILLS DEVELOPMENT

Activities completed and verified:

Delivered by:

Date: