Reset Form

Vensure Employer Services

New Hire Safety Orientation Checklist

Employee Information	
Name:	**Start Date:**
Position:	**Manager:**

Policies Reviewed	Additional Training
☐ Safety and Health Program ☐ Accident and Incident Reporting ☐ Workers Compensation ☐ Safety Rights and Responsibilities ☐ Employee Safety Rules ☐ Personal Protective Equipment ☐ Hazard Prevention And Control ☐ Property Maintenance ☐ Emergency Action Plan ☐ Progressive Disciplinary Program ☐ Hazcom	**Note:**

Employee Acknowledgement	
Employee Signature:	**Date:**
Trainer Signature:	**Date:**