

# Induction checklist

Business Name:

Worker's Name:

Employment start date:

Position/Job:

Manager/Supervisor:

Department/Section:

**Explain your business:**

Business structure	<input type="checkbox"/>	Type of work	<input type="checkbox"/>
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**List and introduce your key people and their roles:**

Manager/Owner	<input type="checkbox"/>	Supervisor(s)	<input type="checkbox"/>
Co-workers	<input type="checkbox"/>	Health and Safety Representative(s)	<input type="checkbox"/>
Fire/Emergency warden(s)	<input type="checkbox"/>		

**Explain their employment conditions:**

Name or award or agreement (if relevant) and conditions	<input type="checkbox"/>	Out of hours enquiries and emergency procedures	<input type="checkbox"/>
Job description and responsibilities	<input type="checkbox"/>	Notification of sick leave or absences	<input type="checkbox"/>
Leave entitlements	<input type="checkbox"/>	Time recording procedures	<input type="checkbox"/>
Work time and meal breaks	<input type="checkbox"/>	Union membership and award conditions	<input type="checkbox"/>
Pay arrangements	<input type="checkbox"/>	Taxation and any other deductions	<input type="checkbox"/>
Rates of pay and allowances	<input type="checkbox"/>	(including completing the required forms)	<input type="checkbox"/>
Superannuation	<input type="checkbox"/>		

**Explain your work health and safety administration:**

Consultative and communication processes, including employee health and safety representatives (HSR)	<input type="checkbox"/>	Incident/accident and hazard reporting procedures, including where to find reporting forms	<input type="checkbox"/>
Policy and procedures	<input type="checkbox"/>	Workers compensation claims	<input type="checkbox"/>
Roles and responsibilities	<input type="checkbox"/>	Employee assistance program (EAP)	<input type="checkbox"/>
Hazards of work	<input type="checkbox"/>		

**Explain your security:**

Cash	<input type="checkbox"/>	For workers and their personal belongings	<input type="checkbox"/>
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### Show your work health and safety environment:

List of Safe Work Procedures (SWPs):

- 1.
- 2.
- 3.
- 4.
- 5.

Emergency plan, procedures, exits and fire extinguisher locations

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First Aid facilities such has the first aid kit and room location

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Information on hazards and controls

☐

### Show your work environment:

Work station, tools, machinery, and equipment used for job

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Phone calls and message collecting system

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Car parking

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Procedures for the workplace building

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Locker and change rooms

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Eating facilities

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Washing and toilet facilities

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### Explain your training:

First aid, fire safety and emergency procedures training

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Hazard-specific training (e.g. manual handling, hazardous substances)

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Job-specific training (e.g. for a required licence or permit)

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On the job training in safe work procedures

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### Conduct a follow-up review:

Repeat any training required or provide additional training if needed

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Review work practices and procedures with the worker

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Ask and answer questions

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### Comments/follow-up action:

## Induction acknowledgement

Conducted by (name):

Date:

Position/Job:

Signature:

Worker signature:

Review date:

Review conducted by (name):

Date:

Position/Job:

Signature:

Worker signature: