

ORIENTATION

Rev 01 Effective 2026-09-01 CURRENT VERSION Completed in field

Young or new worker topics in 3.23. Before they begin.

WORKER INFORMATION

WORKER NAME

-

EMPLOYEE ID

-

POSITION

-

SUPERVISOR

-

PROJECT INFORMATION

PROJECT

-

CLIENT

-

SITE

-

ADDRESS

-

DATE

-

TIME

-

INSPECTION

INSPECTED BY

-

TIME

-

ITEM	PASS	FAIL	N/A	COMMENTS
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- | | | | | |
|--|--|--|--|--|
| Supervisor name and contact | | | | |
| Rights and responsibilities, including refusal | | | | |
| Company and workplace rules | | | | |
| Hazards of this workplace | | | | |
| Working alone | | | | |
| Violence / bullying | | | | |
| PPE for this lift | | | | |
| First aid location and how to summon it | | | | |
| Emergency procedures | | | | |
| Task shown, not just told | | | | |
| Proven shown | | | | |
| WHMIS as it applies here | | | | |

Committee or worker-rep contact (if applicable)

PPE

PPE IN USE

-

OTHER PPE

-

EMERGENCY

EMERGENCY CONTACT

-

FIRST AID

-

EMERGENCY ACCESS

-

MUSTER POINT

-

RESCUE PROCEDURE

-

COMMENTS

COMMENTS

-

SIGNATURE

PRINTED NAME

-

ROLE

-

DATE

-

PRINTED NAME

-

DATE

-