

Safety Orientation Guide

1. Call Safety Office (1677) - (one week prior) to schedule orientation session with employee for **1st day of employment**.

After Safety Office training session - supervisor is then responsible to complete remaining "applicable" training topics (checkmarked) by the **end of the first 10 day** employment period by reviewing written policy/program with employee. Go to: www.southwestern.edu/safety to print the written programs (place in 3 ring binder). **Return completed and signed form to Safety Office.**

Topics in bold (checkmarked) on front of form are conducted by Safety Office. Topics on back of form are the responsibility of the supervisor.

Key: X: generally applies for all employees
S: applies only to "some" affected employees

WP - written program to review
CT - formal classroom training available

V/DVD - video or dvd to watch
web - web based training

Employee Name: _____

Supervisor: _____

<i>topics that apply</i>	Safety Topic	Format for Initial training	Faculty	Staff	Athletics	Physical Plant	(Supervisor Initial & Date)	Classroom Training Available - Safety Office (1677)	Annual Refresher Training Required (Supervisors May Conduct Training)	NOTES
	Asbestos (WP)	WP				S		CT	xxx	
	Bloodborne Pathogens (WP)	WP/V	S	S	S	S		CT	xxx	
	Emergency Response Plan (WP)	WP	X	X	X	X				Read Pages 10 - 20
	Safety Policy (WP)	WP	X	X	X	X				
	Workplace Safety Orientation	V				X				
	Hazard Communication (WP)	WP/DVD	S	S	S	X		CT		
	Tractor Safety (WP) - Grounds	WP				S		CT		
	Golf Cart Policy (WP)	WP	S	S	S	X				
	Vehicle Safety Policy (WP)	WP	X	X	X	X				
	15 passenger van training	WEB	S	S	S	S				
	Drivers' License Check		S	S	S	S				Bi-annual check
	Youth Interaction Policy	WP	S	S	S	S			XXX	Annual Sign-Off Form
	Background Check		S	S	S	S			XXX	Bi-annual check

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topics that apply	Safety Topic	Format for Initial training	Faculty	Staff	Athletics	Physical Plant	(Supervisor Initial & Date)	Classroom Training Available - Safety Office (1677)	Annual Refresher Training Required (Supervisors May Conduct Training)	NOTES
	Accidents & Workers Comp. (WP)	WP	x	x	x	x				
	Back Safety - Lifting (WP)	WP		s		x		CT		
	Behavior Based Safety (WP)	WP								
	Compressed Gas Safety (V)	V		s		s				
	Confined Space I	PERMIT				s	WP - NA	CT		
	Confined Space II	METER				s		CT		
	Electrical Safety (V)	V				s				
	Ergonomics - Office (WP)	WP						CT		
	Fire Extinguishers (WP / Hands-On)	WP	s	s	s	s				
	Grinder Wheel Safety (WP)	WP	s			s		CT		
	Hazardous Waste Program (WP)	WP	s	s		s		CT		
	Hearing Conservation - Noise (V) (WP)	WP				s	WP - NA	CT	xxx	
	Heat Stress (WP)	WP			s	s		CT		
	Ladder Safety (WP)	WP				x		CT		
	Lead Based Paint (WP)	WP				s		CT	xxx	
	Material Handling (WP)	WP		s		x		CT		
	Machine Guarding (WP)	WP	s			s		CT		
	P.P.E. - Haz. Assessment (WP)	WP	s	s		x		CT		
	P.P.E. - Hands On Review by Supervisor	na	s	s		x		CT		
	Respiratory Protection I (V)	WP	s	s		s	WP - NA	CT	xxx	
	Respiratory Protection II (fit testing session)	na	s	s		s			xxx	
	Slips, trips and falls (WP)	WP		s		s		CT		
	Welding Safety		s	s		s	NA			