

WSU LIBRARIES
EMPLOYEE SAFETY TRAINING & ORIENTATION CHECKLIST

Employee Name: _____ Start Date: _____

Position Title: _____ Library Unit: _____

Safety Representative: _____

First Aid qualified coworkers: _____

Is this employee required to receive First Aid training? Circle One: (yes) (no)

FOR EMERGENCY ASSISTANCE: DIAL 911

Location of Health and Safety bulletin board: _____

Location of pull station(s) for fire alarms: _____

Location of First Aid kit(s): _____

Location of fire extinguishers: _____

Location of AED device: _____

Location of TWO emergency exits: _____

Evacuation gathering area and unit warden: _____

Other emergency equipment (flashlights, etc.): _____

Biohazard kit location and use: _____

Bomb threat procedures: _____

Emergency Procedures Flip Chart – location and contents: _____

Hazardous equipment/machinery: _____

Hazardous chemicals: _____

Potentially dangerous/threatening persons: _____

Personal protective equipment: _____

Reporting accidents: _____

Reporting hazards: _____

I have instructed the employee on the above information.

Supervisor's Signature

Date

I have received orientation on the above information.

Employee's Signature

Date

Distribution:

*Original to employee
Copy retained in departmental personnel file
(LAO and/or HRS – no copy needed)*