Department:       Shop:

Safety Orientation and Training Record

|  |
| --- |
| Employee Name:       Date:       |
| Shop Safety Coordinator:       |
| **#** | **Training** | **Yes** | **Date** |
| 1 | Orientation to the location and content of the Shop Safety program documents: Safety Plan, Standard OperatingProcedures (SOPs). | [ ]  |       |
| 2 | Orientation to the location of MSDS/SDS. | [ ]  |       |
| 3 | Location of Safety Equipment. | [ ]  |       |
| 4 | Emergency procedures, exits, and phone numbers. | [ ]  |       |
| 5 | Specific shop terminology / safety rules. | [ ]  |       |
| 6 | Accident/incident reporting (OARS) procedures. | [ ]  |       |
| 7 | Machine-specific orientation and safe use practices | [ ]  |       |
| 8 | Machine specific LOTO procedures. | [ ]  |       |
| 9 | Waste disposal procedures. | [ ]  |       |
| 10 | Working Alone policy. | [ ]  |       |
| 11 | Visitor policies. | [ ]  |       |
| 12 | Housekeeping and repairs policies. | [ ]  |       |
| 13 | Appropriate clothing policies. | [ ]  |       |
| 14 | Food and Beverage policies. | [ ]  |       |
| 15 |       | [ ]  |       |
| 16 |       | [ ]  |       |
| 17 |       | [ ]  |       |
| 18 |       | [ ]  |       |
| 19 |       | [ ]  |       |
| 20 |       | [ ]  |       |

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