

Employee Safety Orientation Record

Employee Information

DATE HIRED: _____

OHSE Department requirements			
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

Introduction & Instruction	

FMGT Health & Safety Manual (also available on FMGT website)		
	(Tab 14)	
	(Tab 18)	
	(Tab 20)	
	(Tab 23)	
	(Tab 34)	

Personal Protective Equipment location, use, care & maintenance (check as required)			
	<input type="checkbox"/>		<input type="checkbox"/>