

Appendix 17

Town Safety Committee

Training Guidelines

This checklist is to be completed by the Supervisor and the new employee upon hire and filed with the Town Administrator's personnel files.

Employee Name:

Department:

Job Title:

Date of Employment:

Supervisor:

- Issue copy of written Safety Program
- Explanation of Safety & Loss Prevention Committee
- First Aid Kit
- First Aid Log
- Reporting of all incidents or injuries
- Reporting of unsafe conditions
- Emergency Contacts/Phone Numbers
- Evacuation Procedures
- Fire Extinguisher Locations
- Emergency Exit Locations
- Designated Smoking Areas
- Explanation of Personal Protective Equipment (Use, Care, and Mandatory Use)
- Appropriate Clothing/Footwear for the Job
- Review Vehicle Safety and Seatbelt Policies
- Check Valid Driver License (if applicable)
- Review any Special Hazards of Job

Comments:

I have completed the above checklist with my supervisor. I have received the written Henniker Employee Safety Program and have had an opportunity to ask questions. I agree to abide by the written safety rules and procedures provided to me. In addition, I understand that violation of such policies could result in disciplinary action up to, and including termination.

EMPLOYEE SIGNATURE:

DATE:

SUPERVISOR SIGNATURE:

DATE:

Appendix 18