

## **CONTRACTOR INDUCTION CHECKLIST**

NAME:

DATE OF INDUCTION:

## PERSON CONDUCTING INDUCTION:

| INTRODUCTION:   | COMMENTS: |
|---|-----------|
| Organisational overview and site tour.                |           |
| Document Qualifications/Licences.                     |           |
| Outline of site rules (provide copy).                 |           |
| EXPLAIN THEIR EMPLOYMENT CONDITIONS:                  | COMMENTS: |
| Contract or agreement (if relevant) and conditions.   |           |
| Job description and responsibilities.                 |           |
| EXPLAIN WORK HEALTH & SAFETY ADMINISTRATION:          | COMMENTS: |
| Staff Resource Centre.                                |           |
| Emergency Plan & Procedures.                          |           |
| Key Personnel such as fire/ emergency warden          |           |
| Security and Access Arrangements.                     |           |
| Emergency Assembly Points.                            |           |
| Hazard reporting, including where to access           |           |
| Incident/ accident reporting.                         |           |
| Safe Work Procedures & Standard Operating Procedures. |           |
| First Aid.  |           |
| Use of PPE.   |           |
| Workplace Harassment.                                 |           |
| Fatigue Management.                                   |           |



| I confirm the information                       | listed in the Contr | actor Induction C | Checklist has been | n provided to me. |
|---|---------------------|-------------------|--------------------|-------------------|
| Date:   |                     |                   |                    |                   |
| Contractor Name:                                |                     |                   |                    |                   |
| Contractor Signature:                           |                     |                   |                    |                   |
| Supervisor Name:                                |                     |                   |                    |                   |
| Supervisor Signature:                           |                     |                   |                    |                   |
|   | CONTRACTOR C        | OMPETENCY D       | ECLODATION         |                   |
|   | CONTRACTOR C        |                   |                    |                   |
| I confirm that I have be listed plant machinery |                     | ed and that I am  | competent to ope   | erate the below   |
|   |                     |                   |                    |                   |
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| Contractor Signature:                           |                     |                   |                    |                   |
|   |                     |                   |                    |                   |