



## City of Petaluma New Employee Safety Checklist

*To be completed by Supervisor*

### I. Certification

The following have been reviewed with:

Name: \_\_\_\_\_ Date Hired: \_\_\_\_\_

Position: \_\_\_\_\_ Department: \_\_\_\_\_

Y N N/A

City Safety Policy has been discussed with the employee and they have a copy.

Safety rules have been discussed and reviewed.

The Emergency Response Procedures were discussed and reviewed. The employee is aware of the location in the office.

The lockout procedure is discussed and demonstrated.

The Hazard Communication Policy is discussed.

The Fire Prevention Plan is discussed with the employee.

The pamphlet *Facts About Workers Compensation* has been provided to the employee.

Reviewed By:

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date Reviewed

Once complete, return to Human Resources for filing in Employee File.