



Company Induction Sign Off

Name:		Date:	
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Elements of Induction:		Covered Y/N	Comments
1	Company History		
2	Purpose of Induction		
3	Company Policy		
4	Health and Safety Policy		
5	Quality Policy		
6	Environmental Policy		
7	Your Responsibilities		
8	Training Requirements		
9	Drug and Alcohol		
10	Site Rules		
11	On-site Hazards		
12	PPE		
13	First Aid		
14	Welfare Facilities		
15	Management System		
16	Fire Response		
17	Manual Handling		
18	Near Miss		
19	Accident and Incident Reporting		
20	Fatigue Management		
21	Environmental		
22	Paperwork		

I confirm that I have read, understood and will comply with the instruction and information. I have received instruction/information as detailed above.

Inductees Name:		Signature:	
Inductors Name:		Signature:	