



# Co-operative Education Student Safety Workplace Orientation Assignment



**Placement Employer:** This Safety Workplace Orientation Assignment must be used to document the Health and Safety Orientation conducted with your student prior to the start of any tasks at your workplace. The student and the workplace supervisor will complete the orientation together. The student will collect the information and/or write down notes in the space provided. This assignment, or another format documenting this orientation, must be returned to the student's Co-op Teacher.

**STUDENT and PLACEMENT INFORMATION:**

Student Name:		Co-op Teacher:	
Organization:		Job Title:	

**STUDENT SAFETY WORKPLACE ORIENTATION: (to be completed with the placement supervisor)**

<input type="checkbox"/>	1.	Name and Contact Information for the student's immediate workplace supervisor:	
		Name: _____	
		Phone: _____ Ext: _____ Other (specify): _____	
<input type="checkbox"/>	2.	Name of workplace Joint Health and Safety Committee representative (or Safety Representative):	
		Name: _____	
		Phone: _____ Ext: _____ Other (specify): _____	
<input type="checkbox"/>	3.	a) Describe the equipment that will be used during the placement:	
		b) Identify procedures for safe operation of this equipment:	
<input type="checkbox"/>	4.	Identify Worker rights and responsibilities:	
<input type="checkbox"/>	5.	Demonstrate the proper use of Personal Protective Equipment (PPE) as required by the position.	
<input type="checkbox"/>	6.	Identify Restricted/Prohibited:	
		a) Areas	
		b) Tools	
		c) Equipment/machinery	
<input type="checkbox"/>	7.	a) Identify any hazards in the workplace that may be encountered.	
		b) What is the control of these hazards?	
<input type="checkbox"/>	8.	Indicate what to do and whom to see if the student has a concern about safety.	
<input type="checkbox"/>	9.	Specify procedures when there is a fire or other emergency.	

<input type="checkbox"/> 10.	Show the student the location of the following:	
	a) Fire exits	
	b) Fire Extinguishers	
	c) First Aid Equipment	
	d) First Aid Facilities (if applicable)	
<input type="checkbox"/> 11.	a) What is the name of the staff member responsible for First Aid?	
	b) How is first aid treatment recorded?	
<input type="checkbox"/> 12.	Review procedure for reporting workplace accidents and injuries.	
<input type="checkbox"/> 13.	Conduct site-specific WHMIS training for specialized chemicals.	
<input type="checkbox"/> 14.	Outline workplace policies and procedures:	
	a) Workplace Harassment	
	b) Violence prevention	
	c) Working in isolation	
	d)	
	e)	
<input type="checkbox"/> 15.	Review location of important documentation:	
	a) Materials Safety Data Sheets (MSDS)	
	b) Manuals for equipment (if applicable)	
	c) Important telephone numbers	
	d) Location of Health & Safety bulletin board	
<input type="checkbox"/> 16.	Note the location of the ESA v 6.0 poster.	
<input type="checkbox"/> 16.	Other hazards addressed during orientation should be documented and attached on an additional sheet.	
<input type="checkbox"/> 17.	One Safety Checklist may be used to document group student orientation sessions, however, a sign-in sheet (including student names and signatures) must be attached to this Checklist.	

**Workplace Safety Orientation completed:**

Supervisor Name:		Signature:		Date:	
Student Signature:				Date:	