



**Risk Management Department**  
**Safety Office**  
**P.O. Box 2570**  
**Waco, Texas 76702**  
**Main 254 / 750-7045**  
**Fax 254 / 750-5423**

## NEW EMPLOYEE SAFETY ORIENTATION

	Date Completed	Supervisor's Initials	Employee's Initials
City of Waco Incident Prevention Plan discussed with employee			
General safety rules and safety rules specific to job duty			
General hazards in the workplace			
Past department safety problems in employee's area of responsibility			
Employee safety responsibilities:			
Reporting unsafe conditions			
Reporting injuries			
Reporting property damage			
Reporting near-misses			
Equipment and tools assessment procedures			
Care and use of equipment and tools			
Substance Abuse Policy discussed with and signed by employee			
Hazardous chemicals, MSDS's, and MSDS locations			
Proper lifting and materials handling procedures			
Fall and slip hazard recognition and elimination			
Record keeping systems			
Office safety			
Evacuation and emergency action procedures			
Identify locations and use of fire extinguishers			
Identify locations and use of first aid stations			
Employee Safety Suggestion Form			
Safety bulletin board			