

Tailem Bend Community Centre Inc.

HR Staff and Volunteer Induction Checklist

This induction checklist must accompany the new volunteer/employee during the site induction process.

Note items in green for staff only disregard if volunteer, visitor or contractor

Inductee details

Surname:			First name(s):			
Please select empl	oyment status o	f the inductee				
O Volunteer	○ Visitor	○ Contractor	○ Worker – h	an <mark>d</mark> book, coi	ntract, fair woi	k statement
Position:			Date Commenced	d :		
Location: Tailem Be	end Community	Centre				
Supervisor/Manage	er: Tammy Shep	herd				
○ Tax file declaration	on					
O Choice of super	form					
O Bank details (inc	l. bank, BSB, ac	ecount #)				
O Emergency conta	act details (incl.	name, address, phor	ne #, relationship)			
	•		- · · · · · · · · · · · · · · · · · · ·			
Qualifications, licen	ces/vehicle insu	rance, certificates pro	ovided and recorde	ed?	○ Yes	O N/A
National Police Check DCSI Screenings Child, Aged, Disability, Vulnerable, Employment					O Yes	O N/A
		copy of the Health	•	lbook		
		omitted to manager/s	upervisor:			
checklist for undersi	tanding; and acl	knowledgement form			○ Yes	○ N/A
Provide the worker	with the follow	ing information as re	elevant:			
Inductor and Worke	r to initial when	each item is complete	ed		Inducto r	Worker
Site Evacuation Pro	cedures		○ Yes	O N/A		= -
Assembly Point and	Evacuation Ro	ute Communications				
Emergency Warden	s and their locat	tions				
Notification of Crimin	nal Record char	ges				
Work hours and sec	urity provisions		○ Yes	O N/A		
Non Smoking Policy	explained		○ Yes	O N/A		
Drug and Alcohol Po	olicy explained		○ Yes	O N/A		
Site specific hazards	s, risk assessme	ents and procedures	○ Yes	O N/A		

Hazardous substances locations and procedures (stora spills, SDS, etc.)	age, O Y	es O N/	Α	
Accident/incident/near miss reporting procedures	0 Y	es O N/	A	
Issued personal Protective Equipment as required	0 Y	es O N/	A	
List items issued:				
WHS Management System	0 Y	es O N/	A	
Ensure the worker is shown the following as relev	ant:			
Inductor and Worker to initial when each item is complete	ed		Inductor	Worker
Location of first aid facilities and first aid attendants	○ Yes	O N/A		
Fire extinguisher locations in work area	○ Yes	O N/A		
Kitchen amenities, toilets and drinking water	○ Yes	O N/A		
Key system, Alarm Code (if applicable), Security, Financ	e O Yes	O N/A		
Time sheets/invoicing- pay schedule – training matrix	○ Yes	O N/A		
Open close procedure, sole worker, hot weather policy	○ Yes	O N/A		
Snap shot of TBCC - structure of organization/annual rep	oort O Yes	O N/A		
Vision, Code of Conduct, CHSP Rights & Responsibilities	s O Yes	O N/A		
HR Privacy & Confidentiality, HR Conflict flowchart	○ Yes	O N/A		
TBCC front office procedure book, calendars	O Yes	O N/A		
TBCC membership	○ Yes	O N/A		
Server, public use pc, phones	○ Yes	O N/A		
Web site social media	○ Yes	O N/A		
Commitment to help, BOM, staff and volunteers	O Yes	O N/A		
Update phone, volunteer list	○ Yes	O N/A		
Entered into membership	○ Yes	O N/A		
Entered into Telstra TIMS	O Yes	O N/A		
Entered into Mail Chimp	○ Yes	O N/A		
Entered into Survey Monkey	∩ Yes	O N/A		
acknowledge that I, the undersigned, have been advised discussed. Where appropriate, I also undertake to use a Protective Equipment (PPE). I accept that compliance to the site and also a requirement under the WHS legislate.	and have been safe work prac	instructed in	the correct us	age of Personal
The inductor has reiterated the key points of this inductio	n program and	l understand	the procedure	s involved.
Name (Please print) Signature			Date	
Inductor's Name (Please print) Signature			Date	
Tammy Shepherd				

Α

Date first formulated				
Dates approved by Board	V1 V2	June 2016 May 2018		
Next Review Date	September 2019			
Related Documents	Employsure contracts	Employsure contracts and templates		
Legislation				

Signed on behalf of TBCC Board of Management by:

Name: Jack Hunt

Position held: Chairperson

Signatur