

# Volunteer OHS Induction Checklist

*The Volunteer OHS Induction Handbook can be used to assist in conducting an OHS induction.*

| Workplace  | <b>Montpellier Primary School</b> |  |
|--|-----------------------------------|--|
| Brief description of works   |                                   |  |
| General OHS Induction – The Workplace Manager is to ensure that volunteers have been provided with the following information and/or instructions.                                | Provided                          |  |
| Department Health and Safety and Wellbeing (HSW) Policy  | <input type="checkbox"/> Yes      |  |
| Required conduct/behaviour   | <input type="checkbox"/> Yes      |  |
| Security access arrangements / Traffic Management Plan   | <input type="checkbox"/> Yes      |  |
| Introduction to First Aid Officer(s) and location of First Aid Room/Kits   | <input type="checkbox"/> Yes      |  |
| Location of emergency evacuation plans for your area   | <input type="checkbox"/> Yes      |  |
| Location of Emergency Exits  | <input type="checkbox"/> Yes      |  |
| Introduction to workplace Wardens / Incident Controller  | <input type="checkbox"/> Yes      |  |
| Location of amenities  | <input type="checkbox"/> Yes      |  |
| Location of Chemical Register and associated Safety Data Sheets  | <input type="checkbox"/> Yes      |  |
| Information on hazard and incident reporting process   | <input type="checkbox"/> Yes      |  |
| Current School Asbestos Management Plan and Division 5 Audit Report  | <input type="checkbox"/> Yes      |  |
| Plant and equipment Safe Work Procedures & personal protective equipment<br><i>(Note: all electrically powered plant and equipment are to be tested and tagged prior to use)</i> | <input type="checkbox"/> Yes      |  |
| An overview of task(s) and relevant hazards and risks controls are communicated to volunteer workers as detailed in the Risk Assessment  | <input type="checkbox"/> Yes      |  |
| Signatures   |                                   |  |
| Workplace Manager  |                                   |  |
| <i>I certify that the below mentioned volunteer workers have completed an OHS induction.</i>   |                                   |  |
| Name:  | Signature:                        |  |
|  | Date:                             |  |
| Volunteers   |                                   |  |
| <i>I have been provided with and understand (as indicated above) and will comply with all safety instructions.</i>   |                                   |  |
| Name:  | Signature:                        |  |
|  | Date:                             |  |
| Name:  | Signature:                        |  |
|  | Date:                             |  |

*Workplace Manager and/or Management OHS Nominee are to maintain completed forms and store in file.*