



PLUMPTON
COLLEGE

F2a

Student Induction Safety Checklist

To be completed with the student and signed by the student and Work Experience/Work Based Learning Provider and returned to the course tutor/Work based Learning office.

Name of student: _____ **Student Reference number:** _____

Name of work placement provider: _____

Placement address & phone number: _____

Staff member responsible for safety induction: _____

On the first day of the placement please walk around your work areas and discuss the following items of safety with the student/s. Check off the items below to show that you have discussed and shown the student your safety procedures.

Health & Safety Issues Discuss & show the location of	✓ when discussed & shown safety procedures, areas & equipment	Not applicable (state why)
Your safety policy and risk/COSHH assessments	<input type="checkbox"/>	
Your accident reporting system and accident book.	<input type="checkbox"/>	
Your fire procedures/means of escape/ fire extinguishers.	<input type="checkbox"/>	
Who your first aiders are and the location of the first aid box.	<input type="checkbox"/>	
The work place activities they will be undertaking. Check that they have done them before.		
Assess their manual handling techniques and show them your equipment they must use to prevent injury.	<input type="checkbox"/>	
Check any PPE they have, discuss the minimum requirements. Show them where they will find the PPE you are providing.	<input type="checkbox"/>	
The location of welfare facilities (rest room/ washing/toilets)	<input type="checkbox"/>	
Discuss the hazards within your work areas and state the activities which the student MUST not do	<i>Name the activities</i>	



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Show the students any areas where they must not go	<i>Name the areas</i>	

Signed (student): _____ Date: _____

Signed (work provider): _____ Date: _____