**INDUCTION CHECKLIST for Temporary Workers**

Please complete this form for all Temporary Workers allocated to your department and return to the Temporary Staff Bank ([hr-temp@exeter.ac.uk](mailto:hr-temp@exeter.ac.uk)) within 1 week of the worker’s start date.

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| --- | --- |
| **Position** | **Name** |
| **Temporary Worker** |  |
| **Manager completing Induction** |  |

|  |  |  |
| --- | --- | --- |
| Welcome and Introduction | Notes | (Tick when completed) |
| Start/Finish Times and Breaks |  |  |
| Assistance with access or other special requirements |  |  |
| Tour of building (including facilities: Kitchen/Toilets) |  |  |
| Fire exits |  |  |
| First Aid procedures |  |  |
| Departmental system access (Shared drive/SITS/APTOS/SID etc) |  |  |
| Information on nearest shops/places to eat |  |  |

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| --- | --- | --- |
| Health, Safety and Wellbeing | Notes | (Tick when completed) |
| Risk assessments (if applicable) follow risk assessment process for College |  |  |
| Manual Handling (if applicable) Any manual handling risks and appropriate devices / aids to use with tasks? |  |  |
| Lone Working (if applicable) processes and equipment in place. How to raise the alarm. |  |  |
| Pregnant Workers (if applicable) carry out [Maternity Risk Assessment](http://www.exeter.ac.uk/staff/wellbeing/oh/guidanceandadvice/maternityriskassessment/) |  |  |

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| --- | --- |
| **Date Completed** |  |
| **Signed by Temporary Worker** |  |
| **Signed by Manager** |  |