



ORIENTATION CHECKLIST THE FIRST DAY

Employee's Name: _____ Department: _____

Discussion
Completed

Item

- _____ I. Word of Welcome
- _____ II. Tour
 - _____ 1. Restrooms
 - _____ 2. Eating Facilities
 - _____ 3. Transportation facilities (e.g., parking lots, public transportation)
- _____ III. Location of Work Area
 - _____ 1. Desk or work station
 - _____ 2. Necessary supplies and equipment
 - _____ 3. How to operate the telephone system
 - _____ 4. Procedures for fire drills
- _____ IV. Health and safety Precautions
 - _____ 1. First aid kit
 - _____ 2. Fire extinguishers
 - _____ 3. Emergency exits
 - _____ 4. Keys
- _____ V. Introductions -- Who's Who?
- _____ VI. Employee Responsibilities
 - _____ 1. Personal appearance; dress code
 - _____ 2. Performance of duties
 - _____ 3. Attendance/punctuality
 - _____ 4. Confidential information
- _____ VII. Personnel policies
 - _____ 1. Work hours; time sheets
 - _____ 2. Breaks; lunch
 - _____ 3. Vacations; holidays
 - _____ 4. Leave (e.g., annual, sick, maternity, military)
 - _____ 5. Pay procedures
 - _____ 6. Who & when to call in case of illness, lateness, etc.
 - _____ 7. Overtime policy
- _____ VIII. Pledge of Assistance; Words of Welcome

(Supervisor's Signature)

(Employee's Signature)

(Date)



ORIENTATION CHECKLIST THE FIRST WEEK

Employee's Name: _____ Department: _____

Discussion
Completed

Item

- I. Overall organization; employee's relationship to the organization as a whole
- II. Employee's contribution to organization/department objectives
- III. Job content in detail; job description
- IV. Introductions -- Who's Who?
- V. Personnel Policies
- VI. Employee Responsibilities
 - 1. Performance evaluations
 - 2. Employee benefits (e.g., insurance retirement plan, paid leave, workman's compensation, unemployment insurance, etc.)
 - 3. Training opportunities
 - 4. Salary increase practices
 - 5. Transfer/promotion practices
 - 6. Probationary and disciplinary procedures
- VI. Terminology and Forms
- VII. Employee Handbook/Written Procedures
- VIII. Pledge of Assistance; Words of Welcome

(Supervisor's Signature)

(Employee's Signature)

(Date)

For a free, 30-minute consultation on how to implement a successful orientation program, [click here](#).

