INDUCTION CHECKLIST

Name of employee:

Start date:

| **Subject** | **Completed by** | **Date** | **Comments** |
| --- | --- | --- | --- |
| **Welcome**Introduction to departmental manager and line manager Complete and check any outstanding documentation and forms Collect P45 and NI numberIssue swipe/security card |  |  |  |
| **Structure and organisation of the business**Brief historyProducts and servicesKey clients Organisational structureExecutive/management structureLocationsDepartmentsRegulatory bodiesFuture plans and developments |  |  |  |
| **Structure of the department**Departmental structure and roleIts relationship with other departmentsIntroduction to other managersIntroduction to work colleagues |  |  |  |
| **Tour of the office**Entrances and exitsToiletsRest roomsLockers/cloakroomKitchen/canteenStaff notice boardsStore roomsOther facilities, e.g. car parking, sports facilities |  |  |  |
| **Job description**Job dutiesResponsibilitiesReporting lineWorkstation locationTraining needs and objectivesTraining provision Supervision and performance appraisalsPromotion avenues |  |  |  |
| **Terms and conditions of employment**Written statement of employment particulars issuedProbationary periodHours of work, rest breaks and overtimeSalary, including when and how it will be paidExpensesAnnual leave entitlement and holiday rulesSickness and other absence rulesStandards of dressStandards of performance and behaviour expectedDisciplinary and grievance proceduresNotice periodsOther main terms and conditionsCompany discountsStaff Handbook Trade union/employee representatives Worker communications and consultationUseful contacts for issues, e.g. salary queries, computer problems, etc. |  |  |  |
| **Equal opportunities and dignity at work**Equal opportunities policyDignity at work policyTraining |  |  |  |
| **Health and safety**Risk assessmentSafety hazardsSafety rules and precautionsProtective clothing Smoking policyEmergency proceduresLocation of nearest fire exitsLocation of fire fighting equipmentFire alarm and drillLocation of first aid kit Procedure for reporting accidents and location of accident bookPersonal hygieneFirst aid officersDangerous substances or processesSafety representatives  |  |  |  |
| **Use of equipment and restrictions on use**TelephoneComputer, e-mail and InternetPrinterFax machinePhotocopierOther equipment |  |  |  |

Date induction completed:

Signed by line manager: