

# Temporary Worker Induction Log Sheet

## Worker Details

Full Name		Date	
Job Title/Role		Site/Location	
Supervisor		Agency	

## Induction Topics

Topic	Covered	Notes
Site rules & procedures		
Health & safety information		
Emergency exits & assembly points		
First aid arrangements		
Use of PPE		
Accident & incident reporting		
Hazard awareness		
Other (specify)		

## Declaration

I confirm that I have completed the induction and understand the information provided.

Worker Name

Signature

Date

Supervisor Name

Signature

Date