

① Name _____ Date _____
 Employer _____ Project _____

Position _____

Supervisor _____ I am a Supervisor

Emergency Contact	
Name	_____
Number	_____
Relation	_____

New / Young Worker

Circle One

② Are you a New/Young worker as defined by WorkSafeBC? (BC OHSR Sec 3.22) Yes No

③ Has your Employer given you a safety orientation/training and do you have a clear understanding of your duties on site? Yes No

Worker has completed Employer's safety orientation
 Date: _____ Supervisor Initials

Fall Protection

Circle One

④ Does your scope of work require you to use Fall Protection? No Yes

Circle One

Has your Employer instructed you on the Fall Protection system and procedures to be used? Yes No

Hearing Test

Circle One

⑤ Do you have a valid Hearing Test Card? Yes No

Worker has been instructed by Employer
 Date: _____ Supervisor Initials

POLYGON Specific Requirements

Initials

⑥ Report any incidents or injuries to the First Aid Attendant, CSO, or Site Superintendent	
Minimum Clothing Requirement on Polygon Construction Sites	
Participation in Site Safety Meetings (Toolbox Talks, Trade meetings, Full Site meetings)	
Mobile Equipment has right-of-way on site and vehicles may not exceed 15 km/h	
Obey ALL site signage and KEEP OUT of restricted areas (Danger/Caution tape)	
Intoxicating Drugs or Alcohol are strictly prohibited and No Smoking in any building on site	
Hot Work Permit process	

Scan here for the Polygon Construction Health & Safety Program



Site Specific Requirements

Initials

⑦ Location of the current OHS Regulation	
Site Map & Bulletin Board Location	
Emergency Procedures and Muster Location(s) Evacuation: 1 Long Blast First Aid: 3 Short Blasts	
Site Hours and After-hours work requirements	

Notes

⑧ I understand and will comply with the PCML Health & Safety Program (see QR code on this form), the details of this orientation, current Occupational Health & Safety (OHS) Regulations and Site Safety Directives.

Worker Signature: _____ Site Safety Signature: _____

If the Worker cannot effectively communicate in English, a co-worker may translate the information discussed in this orientation, AND a translator must be on site anytime the Worker is on site.

Translator Name: _____ Translator Signature: _____