

The following orientations and trainings are required of all employees and affiliates working on behalf of the School of Engineering and Computer Science. This includes unpaid appointments, volunteers and self-supported graduate students.

**\*Check Completed**

**WSU Vancouver Campus Safety**

[Provided online through Qualtrics \(link\)](#)

**Safety Walk-Through and/or specialized training done with ENCS technician**

[WSU Safety Orientation Walk-Through](#) (page 2 of this form)

**\*Specialized lab training is required only for Power Lab and Clean Room access/work**

**Trainings to be completed via Canvas or Percipio** \*complete only the courses listed below that apply

[Percipio](#): use if you are a student employee, graduate on assistantship, employee

**login** with your WSU network ID, click on user icon, then access under "Compliance" section.

[Canvas](#): use if you are a non-employee student or volunteer; **login** with your WSU network ID.

**List A. Required of all working on behalf of the university;** total time ~ 2.5 hours

1. [Back Safety and Injury Prevention](#)
2. [Emergency and Fire Preparedness](#)
3. [Office Ergonomics](#)
4. [Portable Fire Extinguisher Safety](#)
5. [Slips, Trips and Falls](#)
6. [University Laboratory Safety – Working Safely Required by WSU Vancouver](#)

**List B. Required for anyone working in labs, **other than computer-only labs**;** total time ~ 2 hours

1. [Risk Assessment](#)
2. [University Laboratory Safety – Analyzing Chemical Hazards](#)
3. [University Laboratory Safety – Analyzing Physical Hazards](#)
4. [University Laboratory Safety – Developing and Using Controls](#)
5. [PPE – Eye and Face Protection](#)
6. [PPE – Hand Protection](#)

Trainee Name (type/print): \_\_\_\_\_ Sign/Date: \_\_\_\_\_

Supervisor/Advisor Name (type/print): \_\_\_\_\_ Sign/Date: \_\_\_\_\_

Email completed form to [min.li1@wsu.edu](mailto:min.li1@wsu.edu)

**For Canvas Users:** attach each Certificate of Completion OR screen print of the training transcript showing all courses completed.

**SAFETY ORIENTATION CHECKLIST****WASHINGTON STATE UNIVERSITY  
VANCOUVER***To be completed first day of employment, and every two years thereafter***TRAINEE NAME:****Start Date:****WSU ID #****POSITION/JOB ASSIGNMENT:****Supervisor/Advisor:**

CHECK ONE: New employee    Rehire    Temp    Student    Volunteer    Renewal

*Check*

Purpose of orientation

**Reporting accidents to supervisor immediately**WSU Incident report form S25.20.8: <https://admin.vancouver.wsu.edu/ehs/environmental-health-safety>Near-miss reporting: [closecalls@vancouver.wsu.edu](mailto:closecalls@vancouver.wsu.edu)**First Aid**

Obtaining treatment (Call 911 or Public Safety 6-9001)

Location and operation of emergency equipment such as first aid kits, AED(s) and emergency showers and eyewashes

First Aid / CPR / AED certification courses available through EH&amp;S

**What to do in the event of emergencies**

Exit locations and evacuation routes

Locations and operation of fire alarms, fire extinguishers, building hallway phones, area of rescue alarms, stair chairs, and blue light phones

Specific procedures for medical, chemical, fire emergencies and use of 911

Procedures for emergency care &amp; evacuation of persons with special needs

Emergency Mass Notification System - Sign up: [myWSU>"my Profile">Emergency Notification Link](#)**The total safety program**

Function of safety committee and meetings (VDEN 235)

Introduction to safety committee representative

Safety division resources (Public Safety &amp; Environmental Health and Safety)

Safety policies and rules and their value

**Personal work habits**

Proper lifting techniques, avoiding slips and falls

Good housekeeping

Tobacco Free policy

Safe work procedures

**Potential hazards on the job**

What they are (contact Joe Price (MS, Industrial Hygiene) (360)546-9706)

How to deal with them safely

Required personal protective equipment, its care and use

**On-the-job training (attach additional sheets when necessary)**

Employee skill level and qualifications assessment

General training for assigned tasks

**Specific Training** (Enter record of the training received regarding specific machines or hazard situations. See SPPM 2.18) **Power Lab electrical safety and walking safety tour.**

Comments:

*I have instructed the employee/student on the items checked***DATE/TIME of  
in-person training****FACILITATOR (TECHNICIAN) SIGNATURE***I or my designee have instructed the employee/student on the items checked***DATE****SUPERVISOR (ADVISOR) SIGNATURE***I have received orientation on the items checked***DATE****TRAINEE SIGNATURE**

APPsafetyorientationchecklist SPPM 2.24 August 2014

Email completed form to [min.li1@wsu.edu](mailto:min.li1@wsu.edu)