

## SAFETY CHECKLIST

I, \_\_\_\_\_ understand Saunders Staffing, Inc.'s commitment to safety, quality and service. I also understand:

\_\_\_\_\_ Ninety (90) percent of all accidents are caused by the unsafe actions of the employee.

\_\_\_\_\_ I am responsible for safety.

\_\_\_\_\_ Instructions on reporting unsafe or faulty equipment conditions.

\_\_\_\_\_ Instructions on reporting accidents and near-misses.

\_\_\_\_\_ Instructions on safe lifting procedures.

\_\_\_\_\_ Instructions on use of personal protective equipment.

\_\_\_\_\_ My personal responsibility to be informed of proper work procedures when using tools.

\_\_\_\_\_ The importance of knowing the proper handling of any chemicals used on the job.

\_\_\_\_\_ The importance of observing all rules concerning fire prevention, including proper use and handling of all flammable materials, chemicals, location of smoking areas, fire exits and location and use of fire extinguishers.

\_\_\_\_\_ The importance of knowing the location of the first-aid kits, who is responsible and qualified to perform first aid.

\_\_\_\_\_ The risks associated with blood-borne pathogens and the necessity to wear rubber gloves and to avoid contact with blood and other bodily fluids if administering first aid.

\_\_\_\_\_ The importance of asking questions of client supervisor or trainer if unsure of proper safe work procedures.

\_\_\_\_\_ The importance of informing the Safety Coordinator of any change in job assignment.

\_\_\_\_\_ I am committed to working safely, staying alert and understand that Saunders Staffing, Inc.'s highest priority is to the safety of its employees and client's employees.

\_\_\_\_\_ That Saunders Staffing, Inc. expects all employees to work safely and will not tolerate unsafe work habits, horseplay, the use of drugs or alcohol on the job or any other actions by the employee, needlessly placing him or others at risk.

I also acknowledge that I have received Saunders Staffing, Inc.'s Safety Handbook.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Safety Coordinator's Signature

