

## DOCUMENTATION OF ORIENTATION

(Conducted prior to assignment to children or task and to be placed in each employee's file)

Employee's Name \_\_\_\_\_ Date of Employment \_\_\_\_\_

Employee received orientation in the following:

Facility's Policies and Procedures

Review of State's Health and Safety Requirements regarding:

- 1. Operations, health, safety, activities
- 2. Physical environment and equipment
- 3. Emergency situations
- 4. Food service and nutrition

Employee's Assigned Duties and Responsibilities

Reporting Requirements for:

- 1. Suspected Child Abuse, Neglect or Deprivation
- 2. Communicable Disease
- 3. Serious Injuries
- 4. Missing children

Emergency Weather Plans

Childhood Injury Control

Administration of Medication

Reducing the Risk of Sudden Infant

Death Syndrome (SIDS)

Hand Washing

Fire Safety

Water Safety

Prevention of HIV/Aids and blood borne pathogens

Approved Child Care Training Requirements

Other (list)

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\_\_\_\_\_  
Signature of Person Providing Orientation

\_\_\_\_\_  
Signature of Employee Receiving Orientation

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date