

NEW ASSOCIATE OFFICE ORIENTATION CHECKLIST

ASSOCIATE'S NAME

DATE

All of the following points should be covered prior to the first day of employment:

Supervisor's Initials

- ____ Application
- ____ Student Work Permit
- ____ I-9 Form
- ____ Tax Withholding Forms
- ____ Associate Data Record
- ____ Uniform Requisition/Agreement
- ____ Insurance Enrollment Form (if applicable)
- ____ COBRA Notice & Acknowledgment Form (if applicable)
- ____ Other _____

____ Review Scheduling and Hours

____ Review Handbook

- Customer Service
- 100% Customer Satisfaction
- Dress Code
- Attendance Records and Reporting Absences
- Status (full-time/part-time/casual)
- Wage Information
- Overview of Benefits
- Health Insurance
- Performance Evaluation Process
- Counseling & Discipline Process

____ Collect Signature Page from back of Handbook

____ Review Position Description

____ Review Training Program

____ Parking

____ Where to Report The First Day

Office Orientation Conducted By: _____

SUPERVISOR'S NEW ASSOCIATE ORIENTATION CHECKLIST

The immediate supervisor should cover all of the following points on the associate's first day of Employment. Encourage the associate to take notes. When all of the items on this checklist have been completed and checked, the immediate supervisor and the associate should sign the form and return it to the store office:

- ___ Time card and Time Clock Demonstration
- ___ Location of Work Schedule
- ___ Bulletin Board
- ___ Coat and Personal Item Storage
- ___ Drinking Fountains, Rest Rooms, Lunch/Break Area
- ___ Store Entrance and Exit Procedures
- ___ Store Tour
- ___ Introduce Appropriate Management Members
- ___ Tour of Work Areas
- ___ Introduce Fellow Associates
- ___ Location of Aprons and Supplies
- ___ Location of Safety Equipment (i.e. Fire Extinguishers)
- ___ Location and Use Of Hazardous Chemicals/Materials
- ___ Location of MSDS Sheets
- ___ Telephone Procedures and Courtesy
- ___ Customer Service
- ___ 100% Customer Satisfaction
- ___ Review any Questions
- ___ Collect Outstanding Record Keeping Forms (from Side 1)

This Orientation Conducted By: _____

Associate's Signature: _____