

LEARNING SITE ORIENTATION FORM

Student and Course Information

Student Name	Student ID
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Partner Organization and Your Supervisor

Organization Name and Address	
Supervisor's Name	Supervisor's Title
Supervisor's Email	Supervisor's Phone Number
Back-up Contact Name and Number (if the supervisor is unavailable)	

Learning Site Procedures

Hours I am expected to be at the site:	__:__ - __:__	Total Hours
Where do I park? Where is the closest public transit?		
Check-in and hour tracking procedure:		
Dress code:		
Confidentiality procedures:		

Ensure the orientation covers: ✓

All necessary tools and equipment (if applicable)	<input type="checkbox"/>
Procedures for cost reimbursement (if applicable)	<input type="checkbox"/>
Tour of learning site, including work areas	<input type="checkbox"/>
Introduction to other employees and volunteers	<input type="checkbox"/>
Time to fill out the Learning Plans	<input type="checkbox"/>

Safety training ✓

Personal protective equipment	<input type="checkbox"/>
Emergency Evacuation plan	<input type="checkbox"/>
Other emergency procedures (ie. Fires, lockdowns, etc.)	<input type="checkbox"/>
Risks associated with the clients and/or community	<input type="checkbox"/>
Procedure to report workplace misconduct or sexual harassment	<input type="checkbox"/>
Hazardous materials at the worksite	<input type="checkbox"/>