Contractor Health & Safety Induction Verification of Induction

Company/Business Name:			
Contractor (OIC) Name:		Phone:	
Worker Name:			
Phone:		Email:	
Induction Category:	☐ Consultant or professions☐ Low/Medium Risk Work☐ High Risk Work☐ Construction Project/Print	al contractor ncipal Contractor Appointme	ent .
the relevant part have shown evid engagement/con understand my V agree to follow a maintaining a sar agree to abide by agree to participa I have completed the follo Handbook relevant to my Part A Part B Part C	nderstood the West Moreton Heles of the handbook for the work I ence of licences; certificates; autact Officer where required Work Health and Safety responsing reasonable direction(s) and to reand healthy work environment of the PPE and dress standards pate in a General Evacuation Instrument work.	am undertaking athorisations for the work to be bilities while contracted to Wes a abide by any policy/procedur t procedure when on working at ruction no later than 2 days after	undertaken to the contractor st Moreton Health and re(s) provided in the interest of WMH Facilities
Submitted to:			
Contractor Manager I delegate) I state that I have sighted	·		
induction record			
relevant licence(s	.)		
Commission Act 1991 an Electrical Safety Act 2002	evant licence(s) meet the require d Regulation 2018; the Work He	ements of the Queensland Buil alth and Safety Act 2011 and I	ding and Construction Regulation 2011 and the
Signed:		Date/	

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