

Field Placement Student



Student Name: _____
Start Date of Placement: _____
End Date of Placement: _____
Supervisor Name: _____

STUDENT HEALTH & SAFETY ORIENTATION

The Student Teacher will complete this checklist to ensure the requirements of Bill 18, Stronger Workplaces for a Stronger Economy Act, 2014 are met before work begins.

This documentation will be retained by the WCDSB to confirm training has been completed by the student.

Health & Safety Training on the WCDSB website:

1. Overview of Health & Safety Process and Procedures Presentation
<https://www.wcdsb.ca/programs/coop-placement/index.html>

Click **Step 1**

[Overview of Health & Safety Process & Procedures Presentation](#)

Training includes:

- Ministry of Labour Awareness Training
- General Emergency Procedures
- Briefing on top hazards
- WHMIS - briefing on top hazards

2. Occupational Health & Safety Presentation:
<https://www.wcdsb.ca/programs/coop-placement/index.html>

Click **Step 2**

[Occupational Health & Safety Act Presentation](#)

Includes:

- Violence & prevention policy and program
- WHMIS Training

3. Click **Step 3**
[WHMIS Video \(WMV File\):](#)
www.wcdsb.ca/wp-content/uploads/sites/36/2017/06/PSHSA-Fast-Facts-GHS.pdf

4. Click **Step 4**
[Slips Trips & Falls Video \(WMV File\)](#)

5. **Click Step 5** - <https://www.ontario.ca/page/worker-health-and-safety-awareness-four-steps>

This will take you to the site of the Ministry of Labour:

Worker Health and Safety Awareness in 4 Steps

Please scroll down to – Access the eLearning module (at the link below):

<https://www.labour.gov.on.ca/english/hs/elearn/worker/foursteps.php>

This module will take approximately 60 minutes to complete.

You may voluntarily review the modules of:
Understanding Challenging Behaviour

Please take this checklist to the school site for completion by the student teacher jointly with the site supervisor or designate:

6. Site Tour (emergency procedures)
7. General and site specific safety rules
8. Who to contact in an emergency
9. First Aid Stations

Student Name (please print)

Student Signature

Date

Supervisor/Principal or Vice-Principal Name (please print)

Supervisor/Principal or Vice-Principal Signature

*When completed, forward to the Human Resource Services, Ola Ojo
by scanning a copy via email @ Ola.Ojo@wcdsb.ca*