

EMPLOYEE ACKNOWLEDGMENT FORM FOR PTA EMPLOYEES

Welcome to _____ . We're very happy to have you with us and
(unit name)
and ask that you read this form so you can be better informed about your new job and the duties it involves.

At _____ , we're extremely proud of our safety record,
(unit name)
and we have every right to be. This has been made possible because we care about you and your co-workers.

In order to maintain our fine record, we want to familiarize you with our safety rules and have you adhere to them. We do **not** want you to get hurt on the job, and following the rules will help prevent you from being injured:

1. You must never come to work under the influence of drugs or alcohol.
2. Never operate **any** equipment unless you have been trained and/or instructed to do so.
3. Make certain your work area is safe and free of debris.
4. Do not block aisles or doorways. They must be kept clear at all times.
5. Whenever you lift, bend from the knees, keep the back straight and get help if the load is too heavy.
6. If you are in any way involved in an accident, you **must** report it immediately to the PTA president or designee. This is the only way we can give you the early help you may need.
7. If you have any questions about your job, the PTA president is the person to ask.

Again, we want to welcome you to _____
(unit name)
and wish you every success on your new job.

I have read or have had read to me the above, and I understand it. I will I do my very best to follow these rules.

NAME _____ DATE _____

Address _____

Unit address _____

District PTA _____

Complete in duplicate
Original to Unit Safety file
Copy to California State PTA office