**VOLUNTEER INDUCTION CHECKLIST**

**AND AGREEMENT**

**(INSERT HERE: THE NAME OF YOUR GROUP)**

**(INSERT HERE: THE LOGO OF YOUR GROUP- IF YOU HAVE ONE)**

|  |  |
| --- | --- |
| **NAME OF VOLUNTEER:** |  |
| **VOLUNTEER ROLE:** | (Insert here: the name of the volunteering role) |
| **DATE OF INDUCTION:** |  |
| **NAME OF PERSON SUPERVISING VOLUNTEER:** |  |

**GENERAL INDUCTION ITEMS**

|  |  |  |
| --- | --- | --- |
| **ITEM** | **COMPLETED?** | **NOTES** |
| Person supervising volunteer to meet and greet the new volunteer | 🞏 |  |
| Explain the volunteer role   * Related tasks and activities * Expectations of how the volunteer completes their tasks | 🞏 |  |
| Provide key contact details to volunteer | 🞏 |  |
| Discuss what hours the volunteer will need to work and any related break times | 🞏 |  |
| Explain what the volunteer needs to do if they’re unable to attend their arranged volunteering shift | 🞏 |  |
| Tell the volunteer about your organisation:   * History * Goals * What they do | 🞏 |  |
| Confirm with the volunteer that you have all of their contact details and other required information   * Ensure that your records are accurate | 🞏 |  |
| Explain to the volunteer their rights and responsibilities:   * Visit this page and search for “rights and responsibilities”- [Resources – Volunteering Resource Hub (volunteeringhub.org.au)](https://volunteeringhub.org.au/resources/) | 🞏 |  |
| Provide the volunteer with any equipment that they need to carry out their role | 🞏 |  |

**TOUR OF THE VOLUNTEERING LOCATION/S**

|  |  |  |
| --- | --- | --- |
| **ITEM** | **COMPLETED?** | **NOTES** |
| Introduction to other volunteers and/or staff at the location | 🞏 |  |
| Show the volunteer where facilities are located:   * First Aid Kit * Rubbish bins * Toilets * Water * Break room *(if relevant)* * Change room *(if relevant)* * Kitchen *(if relevant)* * Safety equipment *(if relevant)* * Smoking areas *(if relevant)* | 🞏 |  |
| Show the volunteer where they can find any items that they will need to access to complete their tasks | 🞏 |  |
| Show the volunteer where they can store their personal items | 🞏 |  |
| Explain where to park and/or other transport options to get to the volunteering location | 🞏 |  |
| Show the volunteer where the emergency exits are and/or explain any relevant evacuation procedure/s | 🞏 |  |

**WORKPLACE HEALTH AND SAFETY (WHS)**

|  |  |  |
| --- | --- | --- |
| **ITEM** | **COMPLETED?** | **NOTES** |
| Provide the volunteer with copies of any relevant safety procedures or documents that your group uses | 🞏 |  |
| Provide the volunteer with an overview of how the WHS Act 2020 applies to them:   * Visit this page for information-   [Work health and safety for volunteer organisations - guide (dmirs.wa.gov.au)](https://www.dmirs.wa.gov.au/sites/default/files/atoms/files/211103_gl_whsvolunteer.pdf)   * Identify the volunteer’s and your groups rights and responsibilities under the WHS Act 2020 | 🞏 |  |
| Explain to the volunteer any specific risks associated with the tasks that they will be carrying out:   * Also identify what steps they must take to avoid these risks | 🞏 |  |
| Discuss how the volunteer can report hazards and incidents related to their volunteer tasks | 🞏 |  |
| Tell the volunteer how they can make a complaint or share a grievance related to their volunteering role | 🞏 |  |

**ADDITIONAL ROLE-SPECIFIC INDUCTION ITEMS**

|  |  |  |
| --- | --- | --- |
| **ITEM** | **COMPLETED?** | **NOTES** |
| (Insert here: an extra discussion item if your group has one) | 🞏 |  |
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| (Insert here: an extra discussion item if your group has one) | 🞏 |  |

**VOLUNTEER AGREEMENT**

Please read the information below and confirm by ticking:

* If the induction item has been completed; and
* That you understand the information.

If you are unsure about any of the information, please ask your friendly supervisor to explain the item.

|  |  |
| --- | --- |
| **ITEMS** | **COMPLETED?** |
| I have been provided with any specific items that I require in order to be able to carry out my volunteering tasks. | 🞏 |
| I have been provided with written information related to my volunteering role and the group I’m volunteering for. This includes the contact details of my supervisor. | 🞏 |
| I will at all times comply with the policies and/or procedures relevant to my volunteer role as outlined in my induction. | 🞏 |
| I have received a role-specific induction and understand my volunteer duties. | 🞏 |
| I have been advised of who to report to should I have any questions, concerns or feedback and have been introduced to available volunteers and staff on site. | 🞏 |
| (Insert here: an extra agreement item if your group has one) | 🞏 |
| (Insert here: an extra agreement item if your group has one) | 🞏 |
| **WORKPLACE HEALTH AND SAFETY** | |
| I understand my rights and responsibilities under the WHS Act 2020 | 🞏 |
| I am aware of the risks of my volunteer role and understand how to do my tasks safely so that I can avoid them | 🞏 |
| I have been provided with a volunteer job dictionary | 🞏 |
| I understand how to report hazards and incidents | 🞏 |
| I agree to provide feedback on WHS matters related to my volunteer role if necessary | 🞏 |
| (Insert here: an extra safety agreement item if your group has one) | 🞏 |
| (Insert here: an extra safety agreement item if your group has one) | 🞏 |

## By signing below you are acknowledging your understanding of, and agreement to, the items above.

|  |  |  |  |
| --- | --- | --- | --- |
| **VOLUNTEER SIGNATURE:** |  | **DATE:** |  |
| **SUPERVISOR SIGNATURE:** |  | **DATE:** |  |

**(INSERT HERE: A STATEMENT FROM YOUR GROUP TO THE VOLUNTEER TO THANK THEM FOR JOINING YOUR VOLUNTEERING TEAM)**