



TOWN OF DAVIE NEW EMPLOYEE CHECKLIST

Department/Division _____ Name: _____

Position Title _____ Hire Date: _____

DIRECTIONS: The New Employee Checklist is to be conducted by the employee's immediate supervisor or designee. This form must be completed and returned to the Human Resources Department before the employee's second pay period.

Scheduled for New Hire Orientation with the Human Resources Department.

Date, time, and location: _____

Met with the Town Administrator (if not during orientation, to be scheduled with Administration).

Scheduled to receive Procurement Process Training, **applicable to employees with purchasing responsibilities only**

(to be scheduled with the Procurement Manager). Date and time of training: _____

Scheduled for CPR Training, (to be scheduled with the Fire Department, phone number: (954) 797-1213).

Date and time of training: _____

Scheduled to receive an ID Badge with the Human Resources Department.

Issued keys, tools, uniforms and/or other Town property/equipment, if applicable. List all Town property/equipment issued and who to contact if lost or damaged. _____

Given a tour of the department and building (to include bulletin boards, parking, bathrooms, office, elevators, break room, and other facilities, if applicable).

Signed the Class Specification (ensures the employee understands their specific duties and responsibilities).

Explained the location of employee's workplace as well as use and care of tools and equipment.

Introduced to employees within the department and given a full explanation of the work of the department in relation to other departments, the employee's specific position in the unit and the working relationship with other employees.

Explained safe work habits and reporting of work related injuries and/or illnesses.

Discussed who the employee reports to and who they can contact for future job related assistance.

Explained who to contact in case of illness or inability to get to work.

Given department rules and policies, if applicable.

Completed Emergency Management courses, IS 100, IS 200 and IS 700 (FEMA certificates should be forwarded to the Human Resources Department).

Explained driver's responsibilities if involved in a vehicle accident, if applicable.

Discussed the employee's work hours, lunch break and any other related schedule information.

Discussed the evaluation process to be completed at 3, 6, 9 and 12 months during their probationary period.

All newly appointed employees shall serve a probationary period of one year, unless otherwise extended. A probationary employee must successfully pass the probationary period to become a regular status Town employee.

Any changes affecting employee's personnel records (address, name, phone, marital status, beneficiaries, dependents claimed) shall be reported to the Human Resources Department (via the HR Portal, if applicable) as well as your department.

Please sign below to acknowledge you have read and understood the statements on this form and that you have received the applicable information indicated above.

Employee Signature: _____ Date: _____

Print Supervisor's Name: _____ Date: _____