

Cleaning New Employee Training Checklist

Onboarding & Training

START DATE ____ / ____ / ____	NEW EMPLOYEE	TRAINER
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COMPANY & HR

- | | |
|--|--|
| <input type="checkbox"/> Contract signed | <input type="checkbox"/> Timekeeping procedure explained |
| <input type="checkbox"/> Uniform and ID issued | <input type="checkbox"/> Holiday and sick leave policy |
| <input type="checkbox"/> Company policies reviewed | <input type="checkbox"/> Emergency contact details collected |

HEALTH & SAFETY

- | | |
|---|---|
| <input type="checkbox"/> H&S induction completed | <input type="checkbox"/> PPE use demonstrated (gloves, goggles) |
| <input type="checkbox"/> Manual handling training | <input type="checkbox"/> Accident reporting procedure |
| <input type="checkbox"/> Slip, trip, and fall awareness | <input type="checkbox"/> First aid kit locations shown |

CHEMICAL SAFETY

- | | |
|---|---|
| <input type="checkbox"/> SDS / safety data sheets explained | <input type="checkbox"/> Never mix chemicals rule explained |
| <input type="checkbox"/> Chemical labelling training | <input type="checkbox"/> Chemical storage rules explained |
| <input type="checkbox"/> Correct dilution ratios demonstrated | <input type="checkbox"/> Spill response procedure trained |

EQUIPMENT TRAINING

- | | |
|--|---|
| <input type="checkbox"/> Vacuum cleaner operation | <input type="checkbox"/> Spray bottle dilution and use |
| <input type="checkbox"/> Mop and bucket technique | <input type="checkbox"/> Microfibre cloth colour coding |
| <input type="checkbox"/> Floor scrubber / buffer (if used) | <input type="checkbox"/> Equipment cleaning and storage |

CLEANING TECHNIQUES

- | | |
|---|--|
| <input type="checkbox"/> Office cleaning procedure | <input type="checkbox"/> Floor care (carpet vs hard floor) |
| <input type="checkbox"/> Restroom cleaning procedure | <input type="checkbox"/> High dusting technique |
| <input type="checkbox"/> Kitchen / break room procedure | <input type="checkbox"/> Window and glass cleaning |

CLIENT PROCEDURES

- | | |
|--|--|
| <input type="checkbox"/> Client site access and keys | <input type="checkbox"/> Client-specific requirements reviewed |
| <input type="checkbox"/> Alarm codes and procedures | <input type="checkbox"/> Confidentiality and security rules |

SIGN-OFF

- Employee cleared for independent work

Trainer signature and date _____

New employee signature and date _____

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Supervisor review

Notes

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