

## **NEW EMPLOYEE CHECKLIST**

NA	ME:			
	LAST	FIRST NAME	MIDDLE NAME	
MU	ST COMPLETE AT ORI	ENTATION (DATE)		
	PLEAS	E SEND TO MARKET LEA	DER ONCE COMPLETED	
	NEW EMPLOYEE HIRE FORM COMPLETE			
	TD1 FORM COMPLETE			
	TD1BC FORM COMPLETE			
	VOID CHEQUE ATTACHED TO NEW HIRE FORM			
	COPY OF SIN # (expiry date if applicable)			
	COPY OF WORK PERMIT (if applicable)			
	WSBC BULLYING & HARASSMENT POLICY			
	WSBC SAFETY AND SECURITY POLICY			
	CASH HANDLING POLICY			
	HANDWASHING PROCEDURES			
	EMPLOYEE UNIFORM AGREEMENT			
	STAFF MEAL POLICY			
	DISCOUNT POLICY			
	HAVE LOG IN CREDENTIALS SET UP IN PTEU			
	SHOW HOW TO SIGN	I IN/OUT EACH SHIFT		
STO	ORE MANAGER:	· · · · · · · · · · · · · · · · · · ·		
		PRINT	SIGNA	TURE
MARKET LEADER VERIFICATION (SIGNATU				