

CLEANERS INDUCTION TRAINING SHEET

Person Training		
Persons(s) Being Trained		
Contact & Personal Details (Address, Mobile, Email, Date Of Birth, ID):		
1. Have you gone through the Cleaning Risk Assessment?		
2. Do they understand what the Data Sheets mean?		
3. Have you gone through the general Health & Safety and COSHH Policy?		
4. Is it clear what Schedules and Summaries are used to record cleaning activities and any issues?		
5. Are they aware of Notices and Signage in use?		
6. Have you noted the individual details of the cleaner?		
7. Have any HR forms and procedures been adhered to?		
8. Is it understood how to use the right Substances and Cleaning Chemicals?		
9. Is the correct Cleaning Equipment located and known how to be used?		
10. Is the correct PPE arranged by the right person?		
11. Are both normal and emergency access arrangements known?		
12. Are general safety concerns around the building and workplace identified?		
13. What additional training and reviews are needed and when?		
Comments		
Date & Time		
Location		
Trainer's Signature		
Trainee's Signature		