



INDUCTION CHECKLIST: Team/Club/League Welfare Officer

NAME OF WELFARE OFFICER:	
DATE COMMENCED:	
DATE INDUCTION COMPLETED:	

Area	Date Completed	WO Signature	Inductor Signature
Introduction			
<ul style="list-style-type: none"> • Introduction to Team/Secretary/Coaches/Umpires/Young players and Parents • Team Rules • League rules • Facilities • Training 			
POLICIES			
<ul style="list-style-type: none"> • Code of Practice • RE Safeguarding Policy • Team Safeguarding Policy and procedures • Welfare Officer Handbook 			
HEALTH AND SAFETY			
<ul style="list-style-type: none"> • Risk Assessments • 1st Aid procedures • Health and Safety Policy • Transport 			
TERMS & CONDITIONS			
<ul style="list-style-type: none"> • Terms of reference signed and returned • Payment Arrangements • Sickness Procedure • Absenteeism • Disciplinary & Grievance Policy and Procedures • Dress Code 			
TRAINING			
<ul style="list-style-type: none"> • Prior training • DBS status • Training Needs Analysis 			

Please ensure the following declarations are signed by both the Welfare Officer and the inductor following completion of the Induction.

WELFARE OFFICER DECLARATION

I confirm that I have attended the above Induction and that all areas have been explained to me.

Print Name:

Date:

Signed:

INDUCTOR DECLARATION

I confirm that I have carried out the above Induction with (name) on (date)

Print Name:

Date:

Signed:

DISTRIBUTION:

- Original – HR File
- 1 Copy – Welfare Officer
- 1 Copy – Inductor