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| **NEW EMPLOYEE ORIENTATION CHECKLIST** | | | | | | | | | | |
| **Employee Name:** |  | | | | **Position:** | |  | | | |
| **Department:** |  | | | | **Date Hired:** | |  | | | |
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| **Items** | | | | **Instructions/Details** | | | |  | **Explained?** | |
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| *I acknowledge that all items checked above have been thoroughly explained to me and I completely understand them.* | | | | | | | | | | |
|  | | | |  | | | |  |  |  |
| Employee Signature: | |  | | | | Date: | |  | | |
| Supervisor's Signature: | |  | | | | Date: | |  | | |
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